Empowering a global pediatric community through networking and medical education

If you are on a quest to improve the way you work, become a member of the Excellence in Pediatrics Community and connect with a network of pediatric healthcare professionals from around the world through our unique online collaborative platform.

The Excellence in Pediatrics Community enables you to:

- Create your own scientific profile and upload your resources
- Find colleagues around the world by name, location or specialism
- Seek peer-to-peer guidance and exchange best practices through online forums and blogs
- Search for educational resources including E-Learnings and Publications
- Join pediatric networks to help achieve targeted change in specialist areas

Become a member today by visiting community.excellence-in-paediatrics.org

Excellence in Pediatrics operates on a not-for-profit basis to improve child health and healthcare globally by empowering all providers caring for children with the latest practical skills, expert advice and peer-led guidance.

Help shape the future of pediatrics and get involved with our mission by visiting www.ineip.org
# Conference Information

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Dear Colleagues and Friends,

Welcome to the 6th annual meeting of Excellence in Pediatrics (EiP) in the great city of Dubai. The mission of EiP is to improve child health and healthcare globally. This conference is our signature event in pursuit of that mission and it has grown each year. The mantra of the conference is practical advice brilliantly delivered and with the help of the EiP Board and the Program Committee we have assembled an outstanding group of experts to rise to that challenge.

This year as part of our ongoing commitment to the developing world, we have expanded our bursary programs and we have three “schools” occurring during the congress.

1. Our School on Program Planning, Implementation, and Evaluation is in its third year and continues to bring talented young scholars from the developing world who are working on projects to improve public health. This year, alumni from the program will be presenting in an open forum and I urge you to attend and see what a difference they are making.

2. Our School on Children’s Environmental Health is being taught by global representative from the World Health Organization (WHO). It will be teaching frontline pediatric clinicians from Africa to recognize, treat, and advocate for environmental health concerns in children.

3. Our School on Breastfeeding Promotion, Support, and Education will teach busy clinicians from the developing world “everything they need to know” to support breastfeeding in their workplace and to make their practices baby friendly.

For those of you who have come before, you will notice that we have kept many of our more popular sessions and we have endeavored to make this year’s conference the most interactive one yet. Our new “Quiz the Expert” session will pair a front line clinician with a specialist and they will discuss real world cases from their practice and allow you to ask questions. Our Special Interest Groups (SIGs) are open to all and focus on specific topics related to practice. We have 5 of them meeting this year (breastfeeding support, childhood obesity, meningitis surveillance, basal ganglia disease and sepsis) and you are free to attend and share your insights.

As always, our goal is to serve your needs and to help you improve the quality of care you deliver on Monday morning. Please let us know how we are doing and stay in touch.

Best wishes,

Dimitri A. Christakis, MD, MPH
George Adkins Professor of Pediatrics, Adjunct Professor of Psychiatry, Adjunct Professor of Health Services, University of Washington Director, Center for Child Health, Behavior and Development, Seattle Children’s Research Institute Chairman of the Excellence in Pediatrics Institute
Excellence in Pediatrics Institute Advisory Committee

Committees

Excellence in Pediatrics Institute Board

Chair:

Dimitri A. Christaklis, MD, MPH, George Adkins Professor of Pediatrics, University of Washington & Director, Center for Child Health, Behavior, and Development, Seattle Children’s Research Institute, USA

Members (listed in alphabetical order):

Fatma Al Jasmi, MBBS, FRCPC, FCMG, Assistant Professor of Paediatrics, Faculty of Medicine and Health Science, UAE University, Al Ain, United Arab Emirates

Frederick A. Connell, MD, MPH, Professor & Associate Dean, School of Public Health, University of Washington, Seattle, USA

Steve Cunningham, Consultant & Honorary Reader in Paediatric Respiratory Medicine, Department of Respiratory and Sleep Medicine, Royal Hospital for Sick Children, Edinburgh, UK

Terence Stephenson, BSc, DM, FRCPCH, FRCP, FRACP, FRCP, FRCPI, FHKAP; Nuffield Professor of Child Health, Institute of Child Health, University College London; Chair, UK Academy of Medical Royal Colleges 2012-2015 Chair Elect, General Medical Council (UK) 2015-2018; Past President, UK Royal College of Paediatrics and Child Health 2009-2012; United Kingdom

Catherine Weil-Olivier, Professor of Paediatrics, Department of Paediatrics, University Denis Diderot Paris VII, France

Excellence in Pediatrics Institute Advisory Committee (listed in alphabetical order):

Mansour Ahmad J Ali, Chief of Pediatric Perioperative Services & Head of Department of Pediatric Surgery, Hamad General Hospital (HMC), Doha, Qatar

Eulaia Baselga, Dr., Clinical Chief, Pediatric Dermatology Unit & Coordinator, Department of Dermatology, Hospital De La Santa Creu I Sant Pau, Barcelona, Spain

Lawrence F. Eichenfield, MD, Professor of Pediatrics and Medicine (Dermatology), Chief, Pediatric and Adolescent Dermatology, University of California, San Diego School of Medicine and Rady Children’s Hospital and Health Center, San Diego, California, USA

Steffen Husby, MD, PhD, Department of Paediatrics & Hans Christian Andersen Children’s Hospital, Odense University Hospital, Denmark

Giovanni Montini, Consultant in Pediatric Nephrology, Nephrology and Dialysis Unit, Department of Pediatrics, Sant’Orsola Hospital, Bologna, Italy

Antonio Nieto, Vice-President of the Spanish Pediatric Association-AEP & Paediatric Allergy Unit, Hospital Infantil La Fe, Valencia, Spain

Somashekhar Nimbalkar, MD, Department of Pediatrics, Pramukhswami Medical College, Karamsad and Central Research Services, Charutar Arogya Mandal, Karamsad, Gujarat, India

Althimalapet V. Ramanan, FRCPCH, FRCP, Lead Consultant in Paediatric Rheumatology & Reader, University of Bristol & Bristol Royal Hospital for Children & Royal National Hospital for Rheumatic Diseases, Bath, UK

Nalini Samir Shah, Professor & Head, Department of Endocrinology, Seth G S Medical College, K.E.MHospital, Parel, Mumbai, India

Joan-Carles Suris, MD, MPH, PhD, Head, Research Group on Adolescent Health, Instituto de Social and Preventive Medicine & Associated Physician, Multidisciplinary Unit for Adolescent Health, Lausanne University Hospital, Switzerland

Marc van Ranst, Laboratory of Clinical and Epidemiological Virology, Rega Institute for Medical Research, University of Leuven, Belgium

Yonghong Yang, Beijing Pediatric Research Institute, Beijing Children’s Hospital, Capital Medical University, Beijing, China

For biographies please visit the EiP Governance section on our website http://2014.ineip.org

Conference Information

Conference Organiser

Promoting and sustaining excellence in paediatric health and health care globally

Excellence in Pediatrics is an international Paediatric Community that operates on a non-profit basis to facilitate the refinement of raw scientific information into best clinical practice for child health professionals. These professionals include both general practitioners, and community- or hospital-based paediatricians. EiP was developed exclusively to provide continuous medical education of unparalleled quality in unique support of the daily clinical practice of paediatric health care professionals. Our approach to do this is effective because it is direct: We notify end users directly via our global network. Leading clinical experts translate emerging academic research effectively into instantly deployable clinical skills. These high-quality translations are effectively made available for our global members through direct communication so they can quickly understand the news, adapt their practices, and improve patient care standards.

Direct communication to frontline physicians is effective. It means real change. To find out more and join us in our mission, please visit our website: www.ineip.org

EiP Community,
71-75 Shelton Street,
London
WC2H 9UQ,
United Kingdom
Tel: +44 175 333 6101
**Conference Venue**

Spread across two iconic towers, the JW Marriott Marquis Hotel Dubai is the venue for the Excellence in Pediatrics 2014 Conference. Elevated above Dubai’s business district on Sheikh Zayed Road, the JW Marriott Marquis Dubai resides in the Business Bay area, in close proximity of Downtown Dubai and only short driving distance from Dubai International Airport. The hotel features outstanding event and business facilities that will allow the conference and parallel meetings and Summits to all take place in the same place.

Additionally, the hotel offers a wide range of complimentary services, including high speed internet access in all public areas and a complimentary shuttle service to the business district.

**Conference Venue Address**

JW Marriott® Marquis Hotel Dubai  
Sheikh Zayed Road, Business Bay  
PO Box 121000, Dubai, UAE  
T: +971 4 414 0000  
F: +971 4 414 0001  
Web: jwmarriottmarquisdubai.com

**Official Language**

The official language of the Conference is English.

**Badges & Conference Material**

Name Badges and Conference Material will be provided on-site to all registered delegates at the Conference Registration Desk, from 3 December to 6 December. Badges are to be worn at all times, for reasons of security and identification. You will not be permitted to enter any room without your badge.

**CD of Abstracts**

A CD-Rom including Abstracts of oral and poster presentations will be distributed to all registered delegates together with their Conference Material.

**Certificate of Attendance**

All registered delegates are entitled to a Certificate of Attendance. Certificates can be collected from the Conference Secretariat on the last day of the Conference. The certificates will be provided onsite on completion of a Conference feedback form.

**Continuing Medical Education (CME)**

The Excellence in Pediatrics 2014 Conference is accredited by the European Accreditation Council for Continuing Medical Education (EACCME) to provide the following CME activity for medical specialists. The EACCME is an institution of the European Union of Medical Specialists (UEMS), www.uems.net.

The ‘Excellence in Pediatrics’ is designated for a maximum of 15 hours of European external CME credits. Each medical specialist should claim only those hours of credit that he/she actually spent in the educational activity.

Through an agreement between the European Union of Medical Specialists and the American Medical Association, physicians may convert EACCME credits to an equivalent number of AMA PRA Category 1 Credits™. Information on the process to convert EACCME credit to AMA credit can be found at www.ama-assn.org/go/internationalcme.

Live educational activities, occurring outside of Canada, recognized by the UEMS-EACCME for ECMEC credits are deemed to be Accredited Group Learning Activities (Section 1) as defined by the Maintenance of Certification Program of The Royal College of Physicians and Surgeons of Canada.
Important Information

First Aid
If you need assistance during the Conference, please contact the Conference Secretariat.

Liability & Insurance
Delegates are advised to arrange health and accident insurance before travelling to the Conference. The Conference Organisers cannot accept liability for personal injury or loss/damage to property and belongings of delegates during the Conference or their stay in Dubai.

Mobile Phones
Delegates are kindly requested to switch off their mobile phones during the Conference sessions.

Internet Access
The JW Marriott® Marquis Hotel Dubai offers WiFi service of 20 MB. There will also be a dedicated WiFi Zone in the Exhibition area providing seating, and charging points for laptops and mobile devices.

* Please refrain from leaving your personal belongings unattended in any conference area

Exhibition Opening Hours
The exhibition will be open for the duration of the Conference, please note opening times below:

Thursday 4 December: 09.00 – 17.30
Friday 5 December: 08.30 – 18.00
Saturday 6 December: 08.30 – 13.30

Programme Changes
Due to circumstances beyond the control of the Conference Organisers, last minute changes to the programme may be unavoidable. All information included in this programme is accurate until the day of printing, 11 November 2014.

Conference Highlights and an Introduction to our Initiatives and Networks

Conference
The 2014 Conference is the sixth in a series of annual international pediatric conferences, organized by the Excellence in Pediatrics Institute, presenting the latest, most insightful and authoritative overview of key developments in modern pediatrics - delivered by outstanding speakers. Excellence in Pediatrics was launched in 2009 in Florence, followed by London in 2010, Istanbul in 2011, Madrid in 2012, Doha in 2013 and we are thrilled to be in Dubai for the 2014 edition of the conference.

Just some of the conference highlights include:
• An outstanding international faculty featuring over 70 internationally renowned speakers from all over the world.
• Over 80 scientific sessions in an inspiring mix of interactive formats and group learning - allowing you to select session by format as well as topic
• Access to the latest practice-changing advice that can instantly be leveraged in your everyday clinical practice
• Every session has 3 clear learning objectives, instantly deployable in your every-day practice.

EiP’s Initiatives, Summits, Forums & Networks
EiP conducts a number of targeted initiatives each year to raise awareness, educate and inform paediatric healthcare professionals, from around the world, about emerging areas of development, treatment methods, and to fill existing knowledge gaps.
• The Active Healthy Living Initiative, MENA Summit & Network - dedicated to help paediatricians promote energy balance, active and real living. Active Healthy Living aims to enable healthcare providers worldwide to better understand and manage immediate and long-term health questions related to diet, nutrition, hydration, and physical activity.
• The HPV Initiative, Summit & Network - dedicated to increasing the uptake of HPV vaccination rates by sharing best practices amongst target countries. KOL led with the potential to make an immediate difference.
• The Meningitis Initiative, Summit & Network - designed to increase the pace of change, protect children from meningitis and support the establishment of improved meningitis surveillance capacity, both in the Middle East, and around the world.
• The Global Infant Skin Care Initiative, Summit & Network - aiming to identify and dispel myths surrounding baby skin care among paediatricians and parents. This multi-year initiative aims to establish best practices and disseminate them through physician networks in target countries, in a bid to increase the quality of advice provided to parents.
• The Rare Diseases Initiative, Forum & Network - An educational campaign aiming to increase the awareness and competence of general paediatricians to accurately suspect rare diseases, facilitating early diagnosis and treatment where available.

All Summits and Forums above will take place in Dubai, at the same time as this year’s conference, and although participation takes place in a closed session format, all recommendations and report will be published online.

We would encourage you to join the EiP Community, the online collaborative platform for EiP Members, and work with each initiative to make an impact around the world. Play your part and join one of EiP’s dedicated Networks in an area of pediatrics that you care passionately about. Visit the EiP Community website today for more information: http://community.excellence-in-paediatrics.org/
Registration

You may register on-site at the Conference Secretariat, which will be operating on the following dates:

- **Wednesday 3 December**: 19.00 – 21.00
- **Thursday 4 December**: 07.30 – 17.30
- **Friday 5 December**: 07.30 – 18.00
- **Saturday 6 December**: 07.30 – 14.30

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<th>Registration Type</th>
<th>Participation to Excellence in Pediatrics 2014 ON-SITE Registration 4-6 December</th>
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<tr>
<td>Full Delegate</td>
<td>$ 700</td>
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<tr>
<td>Trainee/Young Investigator</td>
<td>$ 500</td>
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<tr>
<td>Participant from a developing country</td>
<td>$ 500</td>
</tr>
<tr>
<td>Nurse</td>
<td>$ 250</td>
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<tr>
<td>Student</td>
<td>$ 160</td>
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All prices are quoted in US Dollars

- Please note that the reduced registration fee for trainees / young investigators is available for doctors and researchers under 35 years old. Please submit an official document such as ID card or passport indicating your birth date.
- The reduced registration fee is also available for participants from developing regions, as per the World Bank. To be considered for this category, please submit a letter of recommendation from your employer verifying your workplace with full contact details.
- To be considered for the nurse or student registration categories, please submit the relevant official documents as proof of status.

If a delegate is unable to provide the required documentation when applying for a reduced registration rate on-site, the Full Delegate rate will be offered by the Conference Secretariat. For your information, please bear in mind that the registration fees do not include insurance of participants against accidents, sickness, cancellation, theft, property loss or damage. Participants are advised to take out adequate personal insurance.

Registration Entitlements for all Registration Types:
- Participation in all scientific sessions
- Entrance to the exhibition area
- Conference Materials
- Coffee Breaks + Lunch Breaks + Certificate of Attendance with CME credits

Conference Information

Information for Speakers, Oral and Poster Presenters

Speakers’ Ready Room

A Speakers’ Ready Room will be operating throughout the duration of the Conference (Salon 7, 6th Floor). Speakers are kindly requested to hand in their presentation (USB-key, CD-ROM, DVD) at least one (1) hour before their scheduled presentation time. If your presentation is scheduled early in the morning, you are kindly requested to hand in your presentation at the Speakers’ Ready Room the day before. All versions of MS PowerPoint are accepted, including Mac. If you are using embedded video clips in your presentation, please remember to submit video files separately.

The following audiovisual equipment will be available for all presenters:
- PC
- Data video projector (PowerPoint presentations)
- Laser Pointer
- Microphones

Oral Presentations

If you are presenting an oral podium presentation, you are kindly requested to observe the following points:
- Please declare any relevant links to industry or other conflicts of interest at the beginning of your presentation.
- Please speak slowly and clearly. English is the working language of the conference, but not necessarily the native language of the delegates.

Poster Presentations

If you are presenting a poster, you are kindly requested to observe the following points:
- English is the official Language of the Conference.
- Each presenting author should be present on the time and date of his/her presentation in the poster area.
- You are expected to be standing in front of your poster for the duration of the poster session.
- During the poster session, a moderator will lead Poster Walk Presentations around all of the posters at that session. When the moderator visits your poster, you will be provided 5 minutes to present the key points of your poster.

For Posters to be exhibited, please note the following:
- The necessary material for displaying the posters will be available in the poster area.
- Poster numbers will be displayed at the top of the panels.
- The corresponding poster panel number for each poster presented has been provided by the Conference Organisers, along with abstract presentation guidelines.
- Mounting and dismantling of posters will be done as specified in the information already sent to poster presenters by the Conference Organisers.
- Please note that posters should be 80 cm (wide) x 190 cm (tall) maximum (portrait layout).
- As a courtesy to other presenters, participants are kindly requested not to move or remove poster numbers or change the order of the assigned poster boards.
- It is essential that presenters clear their poster board promptly and within the scheduled time. Material left on a poster board after the removal deadline will be discarded.
- The Conference Organisers are not responsible for materials left behind and any other that is stolen or damaged.
Programme User Guide

The programme has a number of sessions taking place, many of which run in parallel. Below is a description of various sessions taking place which can be attended by all delegates:

Plenary sessions
Single-speaker keynote lectures by leading experts, chosen to inspire as well as educate. Topics will be of broad interest to all who care for children and present state of the art, state of the science related to clinical practice and public health. Each lecture lasts for 20-25 minutes with 5-10 minutes for questions.

Up To Date sessions
Designed to provide clinical updates and practical tips on specific topics that will improve the care general pediatricians deliver on the Monday morning after the conference. Each expert will make a 20-25 minutes presentation which will be followed by 5-10 minutes of questions.

The EiP Debate
The EiP Debate session format is an effective way to enable presentation and discussion on opposing views about a topic. The debate begins with the moderator stating the conflict. One speaker then presents arguments that affim the proposition and the other speaker presents arguments against the proposition. Each speaker has the opportunity to make a rebuttal towards the opposing argument. Audience vote decides the outcome of the EiP Debate.

Interactive Case Series
Highly interactive case-based discussions aiming to promote open discussion around a significant topic of interest. The sessions will combine information and interactive case discussion. Each session begins with a 25-minute lecture on a topic followed by case presentations to emphasize key learning. The total duration of this session format is 90 minutes.

Workshops
During these interactive sessions delegates will have the opportunity to learn and practice specific skills. These sessions include 1-2 expert facilitators who will use a variety of didactic formats to teach a skill. Participants can expect to leave the session with practical skills that they can apply on Monday Morning. The duration of the workshops is 90 minutes and attendance is limited.

Quiz the Expert sessions
A new type of session focusing specifically on actual challenging cases encountered by EiP community members, called “Quiz the Expert”. These sessions will bring together an expert on a specific content area and 1-2 frontline clinicians who will present a series of challenging cases in a specific pediatric field. The duration of the “Quiz the Expert” session format is 30 minutes.

Special Interest Group sessions
At this year’s EiP, we will be introducing Special Interest Groups (SIGs). The purpose of these sessions is to bring together pediatric providers that share an interest in a given topic or area (e.g. breastfeeding promotion, obesity, meningitis surveillance etc). SIG’s are organized by 1-2 chairs from within the community. SIGs combine online year-round discussions with in-person meetings at the EiP congress.
Thursday, 4 December 2014

**Programme at a glance**

**Emirates Ballroom 1 & 2**
- 09.30 - 10.00: EIP Specialist Interest Group: Meningitis Surveillance. Chair: Pamela Ewan
  - 10.30 - 11.00: COFFEE BREAK

**Emirates Ballroom 3**
- 10.30 - 11.00: EIP Up to Date on Preterm Epilepsy: Overview and Approach to Diagnosis and Management. Chair: Jochen Sander

**Emirates Ballroom 6**
- 11.00 - 11.30: EIP Up to Date on Preterm Epilepsy: Overview and Approach to Diagnosis and Management. Chair: Jochen Sander

**Emirates Ballroom 5**
- 11.30 - 12.00: EIP Up to Date on Preeclampsia in Adolescents: How to Spot it and How to Stop it? Chair: Jochen Sander

**LUNCH BREAK**
- 12.30 - 13.00: EIP Quiz the Expert: Margret & Amehisan, Ahmad A. Al-Khaf & Phil Lobenstein

**COFFEE BREAK**
- 13.30 - 14.00

**Emirates Ballroom 1 & 2**
- 14.00 - 14.30: EIP Up to Date on Preterm Epilepsy: Overview and Approach to Diagnosis and Management. Chair: Jochen Sander

**Emirates Ballroom 3**
- 14.30 - 15.00: EIP Up to Date on Human Papillomavirus (HPV) Vaccine: From Mountains of Pakistan to Plains of United Arab Emirates. Chair: Jamal Al Jubeh

**Emirates Ballroom 6**
- 15.00 - 15.30: EIP Up to Date on Endocrinology: Type 2 Diabetes: A Difficult Disorder. Chair: Jamal Al Jubeh

**Emirates Ballroom 5**
- 15.30 - 16.00: EIP Up to Date on Rare Diseases: Newborn Genomics. Chair: Jamal Al Jubeh

**LUNCH BREAK**
- 16.30 - 17.00

**Emirates Ballroom 1 & 2**
- 16.30 - 17.00: EIP Interactive Case Series: Medically Unexplained Symptoms in Children. Chair: Junichi Tamai

**Emirates Ballroom 3**
- 16.30 - 17.00: EIP Interactive Case Series: Medically Unexplained Symptoms in Children. Chair: Junichi Tamai

**Emirates Ballroom 6**
- 17.00 - 17.30: EIP Interactive Case Series: Medically Unexplained Symptoms in Children. Chair: Junichi Tamai

**Emirates Ballroom 5**
- 17.30 - 18.00: EIP Interactive Case Series: Medically Unexplained Symptoms in Children. Chair: Junichi Tamai

**Emirates Ballroom 4**
- 08.00 - 08.30

**Session A**
- 08.30 - 09.00: Early Intervention: Preventing Childhood Disability. Chair: Jamal Al Jubeh

**Session B**
- 08.30 - 09.00: EIP Up to Date on Endocrinology: Type 2 Diabetes: A Difficult Disorder. Chair: Jamal Al Jubeh

**Session C**
- 09.00 - 09.30: EIP Up to Date on Human Papillomavirus (HPV) Vaccine: From Mountains of Pakistan to Plains of United Arab Emirates. Chair: Jamal Al Jubeh

**Session D**
- 09.30 - 10.00: EIP Interactive Case Series: Medically Unexplained Symptoms in Children. Chair: Junichi Tamai
Programme at a glance
Saturday, 6 December 2014

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Programme at a glance
Saturday, 6 December 2014

Scientific Information

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<td>EiP Special Interest Group Childhood Obesity in UAE</td>
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<tr>
<td>Co-Chair: Frederick A. Connell &amp; Kenneth Sherr</td>
<td>Co-Chairs: Terence Stephenson &amp; Helen Foster</td>
<td>Chair: Syed Mahboob Shah</td>
<td>Chair: Syed Mahboob Shah</td>
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08.00 - 08.30

09.00 - 09.30

10.00 - 10.30

13.00 - 13.30
Scientific Programme
Thursday, 4 December 2014

07.00 REGISTRATION OPENING

Hall: Majilis 2
08.00-09.30 EiP Special Interest Group: Meningitis Surveillance
Chair: Jacques E. Mokhbat, Lebanon

Hall: Majilis 1
08.00-09.30 EiP Special Interest Group: Promotion of Breastfeeding in Practice
Co-Chairs: Hessa Khalfan Alghazal, United Arab Emirates & Eng. Randa Jaroudi Saadeh, Switzerland

Hall: Emirates Ballroom 1 & 2
09.30–10.00 Opening Address & Keynote Lecture: Ending Infant Sleep Death: The Missing Piece of the Puzzle
Chair: Dimitri A. Christakis, USA
Speaker: Harvey Karp, USA

Exhibition Hall – Emirates Ballroom Foyer
10.00-10.30 COFFEE BREAK

Hall: Majilis 1
10.00-13.00 EiP School: Programme Planning, Implementation, and Evaluation (PART 1)
Co-ordinators: Frederick A. Connell, USA & Kenneth Sherr, USA

Description
This course is designed to enhance participants’ abilities to develop, implement and evaluate programmatic solutions to public health problems they encounter as paediatricians.

Learning Objectives
• Identify program needs and formulate appropriate program interventions in response to these needs
• Define logistic, training and resource requirements to implement a program intervention
• Identify and define strategies to engage diverse program stakeholders
• Formulate a monitoring and evaluation logic model

Remarks: Closed session for successful bursary applicants

Hall: Emirates Ballroom 4
10.00-11.00 The Global Summit on Meningitis Jointly Held with the 2nd ME Leaders’ Forum on Meningitis (PART 1)
Co-chairs:
1. Dimitri Christakis, MD, MPH, George Adkins Professor of Pediatrics, University of Washington & Director, Center for Child Health, Behavior, and Development, Seattle, USA
2. Muhammed Kheir Taha, Invasive Bacterial Infections Unit, National Reference Center for Meningococci, Institut Pasteur, France
3. Catherine Well Olivier, Professor of Pediatrics, Department of Pediatrics, University Denis Diderot Paris VII, France

Hall: Emirates Ballroom 1 & 2
10.30–11.00 EiP Up to Date: Paediatric Epilepsy: Overview and Approach to Diagnosis and Management
Speaker: Jehan Suleiman, United Arab Emirates
Description
This session will provide an overview of a common disorder in children: seizures and epilepsy. This will include the latest definitions and classifications with case examples. The treatment for the common types of epilepsy will be also addressed as well as the indications to refer.

Learning Objectives
• Provide an up-to-date overview of seizures and epilepsy in children
• Help clinicians identify the different and potentially subtle presentations of seizures in infants and children
• Help clinicians manage the common epilepsy syndromes and identify cases when referral to a neurologist is needed

Hall: Emirates Ballroom 3
10.00-11.00 EiP Up to Date: Less Crying / More Sleep: Relieved Parents and Reduced Abuse, Depression and Sleep Deaths
Speaker: Harvey Karp, USA
Description
A new paradigm to reduce infant crying and optimize sleep offers significant benefits to young families. This intervention encourages attachment through rapid, effective responses to infant cries. Parents learn how to imitate five sensations babies experience in utero (swaddling, side or stomach position, white noise, rhythmic motion, sucking.)

Learning Objectives
• Discuss why the first 3 months of life are best thought of as a “missing 4th trimester”
• Explain what is meant by the “calming reflex”
• List 5 techniques (the “5 S’s”) that activate the “calming reflex” and reduce infant crying after invasive procedures

Hall: Emirates Ballroom 6
10.30-11.00 EiP Up to Date: Childhood Obesity: 10 Steps to Solving a Global Pandemic
Speaker: Terence Stephenson, United Kingdom
Description
The education and training of healthcare professionals
Weight management services
Nutritional standards for food in hospitals
Increasing support for new parents
Nutritional standards in schools
Fast food outlets near schools
Junk food advertising
Sugar sweetened drinks tax
Food labelling
An environment friendly to pedestrians and cyclists

Learning Objectives
• To understand the epidemiology of childhood obesity in developed countries
• To appreciate that prevention is more likely to be a successful strategy than treatment
• To understand that behavior change can only occur if “the healthy option is the easy option”
**Scientific Programme**

**Thursday, 4 December 2014**

**Hall: Emirates Ballroom 5**

**EIP Interactive Case Series: The Limping Child: Case Presentations for the Paediatrician**

**Speaker:** Junichi Tamai, USA

**Description:**

The child presenting with an unexplained limp can cause concern for the physician and the parent. This case-based presentation will review common causes for limp in children as well as clinical pearls to help arrive at a diagnosis for these patients.

**Learning Objectives:**

- Refine the diagnostic approach to the child with an unexplained limp by recognizing important elements of the clinical history
- Refine the diagnostic approach to the child with an unexplained limp by identifying key points in the physical exam
- Understand the differential diagnosis for paediatric limp based on patient age

**Hall: Majlis 2**

**10.30 -12.30**

**Oral Presentations – Best Abstracts (OP01-OP08)**

**Chair:** Megan A. Moreno, USA

**THEMATIC STREAM: GASTROENTEROLOGY, NUTRITION & METABOLISM (OP01-OP07)**

**OP01**

**METABOLIC SYNDROME AMONG HEALTHY CHILDREN AGED 6-12 YEARS IN AL AIN, UNITED ARAB EMIRATES**

- Aziz, Faisal1;
- Al Maskari, Fatima; M Shah, Syed

Institute of Public Health, College of Medicine and Health Sciences, United Arab Emirates University, Al Ain, UAE

**OP02**

**PATTERNS AND GENETIC POLYMORPHISMS IN UNCONJUGATED HYPERBILIRUBINEMIA (GILBERT SYNDROME)**

- Kamal, Sanaa1;
- Abdul Salam, Ahmed2;
- Shahid, Khan3;
- Huda, Hassan4

1 Ain Shams Faculty of Medicine, Egypt; 2 Cairo University, Egypt; 3 Salimin Bin Abdul Aziz University, Pakistan

**OP03**

**“MAGIC POTION” TO TACKLE INDIA’S SILENT CRISIS - SAM (SEVERE ACUTE ALNUTRITION) IN CHILDREN**

- Unnikar, Arv1;
- Khudai, Sandhya; Valin, Chhaya; Kulkarni, Raresh; Bichkar, Vrushali

B.J. Government Medical College, Pune, India

**OP04**

**SALINE ALONE VS POLYELECTROLYTES SOLUTION FOR CORRECTION OF DIARRHEA-RELATED METABOLIC ACIDOSES OF HYPERNATREMIC DEHYDRATION**

- Abdelfadil, Astra1;
- Elminia University Hospital of Paediatrics, Egypt

**OP05**

**ESOPHAGEAL FOREIGN BODIES IN PAEDIATRIC PATIENTS: REPORT ON 70 PATIENTS**

- Altolahai, Tarîq; Alsaleem, Alhanouf1;
- Al-Bassam, Abdulrahman2;
- Gado, Abdulmonen3;
- Al-Ajahtani, Ayed4

1 King Khalid University Hospital, Saudi Arabia; 2 King Faisal Specialist Hospital and Research Centre, Saudi Arabia

**OP06**

**CORRELATION BETWEEN THE DIFFERENT PH-METRY SCORES IN GASTROESOPHAGEAL REFLUX DISEASE IN CHILDREN**

- Lupu, Vasile Valeriu1;
- Paduraru, Gabriela; Ignat, Anca2;
- Ciubotariu, Gabriela3;
- Smaranda, Diaconescu4;
- Burlea, Marin

University Medicine and Pharmacy Gr. T. Popa, Romania

**Conference Information**

**Scientific Programme**

**Thursday, 4 December 2014**

**OP07**

**FECAL CALPROTECTIN DURING TREATMENT OF SEVERE INFANTILE COLIC WITH LACTOBACILLUS REUTERI DSM 17938: A RANDOMIZED, DOUBLE BLIND, PLACEBO CONTROLLED TRIAL**

- Savino, Francesca1;
- De Marco, Angela; Caratto, Simona; Mostert, Michael

Città della Salute e della Scienza di Torino, Italy

**OP08**

**A SYSTEMATIC REVIEW OF COMPUTER-BASED REMEDIAL PROGRAMMES FOR PRIMARY SCHOOLCHILDREN DIAGNOSED WITH DYSLEXIA: RESULTS FROM MEDLINE**

- El Baki, Mohamad Ahsanullah1;
- Omar, Khairani; Nor Aripin, Khairun Naim Bin; Abdul Rahman, Tanty Shahrumi2;
- Ithnin, Muslimah; Syaiful, Asmalita; Syed Mohamad, Sharifah Najwa3; Tangku Muhammad4; Tangku A. Madesah5

Universiti Sains Islam Malaysia, Malaysia

**Hall: Salon 8A**

**10.30 -12.00**

**Workshop: A Practical Approach to Joint Examination -pGALS and More**

**Speaker:** Helen Foster, United Kingdom

**Description**

This session will demonstrate pGALS and describe the more detailed regional joint examination (pREMS) based on the look, feel, move, function, measure approach with relevance to clinical scenarios.

**Learning Objectives**

- At the end of the session, attendees will:
  - Be able to perform the components of pGALS to identify abnormal joints
  - Be able to describe the principles of pREMS to examine joints
  - Be able to describe the importance of pattern recognition to determine differential diagnoses

**Hall: Salon 8B**

**10.30 -12.00**

**Workshop: “I can’t (or will not) Breastfeed", Says the Mother; What Should the Doctor Answer (do): Case Studies from the Real World**

**Speakers:** Richard J. Schanler, USA & Arthur I. Eidelman, USA

**Description**

Real world case reports of mothers who do not wish to or cannot initiate breastfeeding or to breastfeed exclusively will be presented. Issues of duration of breastfeeding, when to introduce complimentary foods and the role of pumping will be discussed. The special needs of the preterm infant and the mother’s role will be emphasized.

**Learning Objectives**

- To acquaint theclinician with the common reasons why mothers do not breastfeed
- To equip the clinicians with up to date information in how to respond to such mothers
- To be able to describe the importance of pattern recognition to determine differential diagnoses

**Hall: Emirates Ballroom 1 & 2**

**11.00-11.30**

**EIP Up to Date: Eating Disorders in Adolescents: How to Spot it and How to Stop it**

**Speaker:** Johunn Sundgot-Borgen, Norway

**Description**

The peak onset of eating disorders is adolescence. Body image problems, discarded eating and eating disorders are prevalent especially among adolescent girls and athletes in weight sensitive sports. To prevent the medical and psychological consequences related to eating disorders, early intervention and identification is important.
Learning objectives
• To be aware of the symptoms related to eating disorders
• To describe normal and abnormal growth patterns in infants and children
• To be aware of the recommendations related to exercise/training during treatment

Hall: Emirates Ballroom 6
11.00-11.30
EIP Up to Date: Alarming Trends in Childhood Obesity: From Mountains of Pakistan to Plains of United Arab Emirates
Speaker: Syed Mahboob Shah, United Arab Emirates

Description
In this presentation we will share our research findings from our Global Health Project titled “Developed Developing Countries Partnership for Non-communicable Disease (NCD) prevention. We will share data on prevalence of obesity among Emirati children and children living in Himalayan mountain villages and its impact on CVD risk factors such as plasma lipids, hypertension.

Learning objectives
• Describe the burden of overweight and obesity in children aged 6 to 17 years
• Determine the role of lifestyle factors in the prevalence of overweight and obesity
• Describe the relation of obesity with cardiovascular risk factors

Hall: Emirates Ballroom 1 & 2
11.30-12.30
EIP Up to Date: Diagnosis of Food Allergy in Children
Speakers: Harb A. Harfi, Saudi Arabia & Phil Lieberman, USA

Diagnosis of Food Allergy in Children (Harb A. Harfi, Saudi Arabia)

Description
• Food allergy begin in the first 2 years of life
• Cows milk, hen’s egg allergy are usually outgrown in childhood or adolescent while peanut and tree nut allergy are more likely to persist.
• Prevalence: 6-8% at one year of age
• It drops to 3-4% in adolescent

Diagnosis of food allergy, IgE-mediated depends on accurate history taking looking for symptoms of allergy such as Urticaria, Eczema and or Anaphylaxis after ingestion of certain foods. This should be followed by careful exam looking for signs of allergy in the skin and the respiratory system. Testing both skin and in vitro are used to confirm or exclude the possibility of food allergy. Skin tests are reliable, and predict the possibility of positive food challenge. A negative test is highly predictive of negative challenge. Immune assay in vitro such as Phadia UNICAP is highly reliable with positive result in young children. Food diaries and elimination challenge are used to confirm the diagnosis of food allergy and should be done only by an allergy specialist experienced in his field.

Learning objectives
• After this presentation the audience should be able to understand how to diagnose food allergy and what test to order to confirm the diagnosis.

Oral Immunotherapy to Foods: Ready for Prime Time (Phil Lieberman, USA)

Description
Oral immunotherapy is the only means at the present time to modify the allergic reaction to foods. The only other treatments are avoidance and the use of drugs to treat the acute reaction. Oral immunotherapy has been used successfully to allow children to ingest the food in modest amounts and thus avoid anaphylactic events due to unintended exposure, and in some instances allow the food to be ingested in “normal amounts.” The mechanism of action and the potential role of this treatment will be discussed in detail.

Learning objectives
• The attendee will understand the types of oral immunotherapy used to treat food allergy
• The attendee will be able to determine the efficacy of oral food therapy
• The attendee will understand the mechanisms underlying the efficacy of oral immunotherapy
THEMATIC STREAM: CHILDREN’S ENVIRONMENTAL HEALTH (PP016-PP018)

**PP016**
**CHILDREN’S SAFETY CULTURE AND PROMOTION: AS PERCEIVED BY UNDERGRADUATE PEDIATRIC NURSING STUDENTS**
Refaat, Jaklein*; Moawad, Magda
Faculty of Nursing, Egypt

**PP017**
**SECOND HAND SMOKE EXPOSURE IN THE ODESSA REGION, UKRAINE: PREVALENCE AND ASSOCIATION WITH RESPIRATORY DISEASES IN INFANTS**
Kuzmenko, Tetiana*; Arayev, Mykola; Kukushkin, Vitalii; Lowe, John
Odessa National Medical University, Ukraine;
*University of the Sunshine Coast, Australia

**PP018**
**OVERWEIGHT AND HIGH BLOOD PRESSURE IN PRESCHOOL CHILDREN: IDENTIFY TO EARLY INTERVENE**
Aparicio, Graça*; Costa, Ana Luisa; Cunha, Madealena; Duarte, João; Albuquerque, Carlos
Health School/Polytechnic Institute of Viseu, Portugal;
*College of Natural Medicine/Bristol, UK

THEMATIC STREAM: DERMATOLOGY (PP019)

**PP019**
**PRESENTATION OF PHAKOMATOSIS PIGMENTOVASCULARIS TYPE IIb WITH STURGE-WEBER SYNDROME AND KLIPPEL-TRENAUNAY SYNDROME**
Goksugur, Sevil Bilir; Goksugur, Nadi
Department of Pediatrics, Abant Izzet Baysal University Faculty of Medicine, Bolu, Turkey;
*Department of Dermatology, Abant Izzet Baysal University Faculty of Medicine, Bolu, Turkey

**PP020**
**PSEUDBOHYPOPARATHYROIDISM WITH DIABETES MELLITUS AND HYPOPTHYROIDISM**
Aparício, Graça*; Costa, Ana Luisa; Cunha, Madealena; Duarte, João; Albuquerque, Carlos
Health School/Polytechnic Institute of Viseu, Portugal;
*College of Natural Medicine/Bristol, UK

THEMATIC STREAM: ENDOCRINOLOGY (PP020)

**PP020**
**AN ASYMPTOMATIC PATIENT WITH ISOLATED CONGENITALLY CORRECTED TRANSPOSITION OF THE GREAT ARTERIES AND COMPLETE ATRIOVENTRICULAR BLOCK**
Karatas, Zehra; Goksugur, Sevil Bilir; Bekdas, Mervan
Department of Pediatrics, Abant Izzet Baysal University Faculty of Medicine, Bolu, Turkey;
*Department of Dermatology, Abant Izzet Baysal University Faculty of Medicine, Bolu, Turkey

**PP021**
**AN UNUSUAL PRESENTATION OF DIARRHOEA**
Das, Arindam*; Venugopal, Pradeep; Stocks, Richard; Morris, Mary Anne
Nicholas, James; Chapman, John
James Paget University Hospital, UK;
*Norwich University Hospital, UK; ²Addenbrookes Hospital, Cambridge, UK

**PP022**
**MEMBRANE TRANSPORT DEFICIENCY: REVIEW OF 4 CASES**
Sales Marques, Jorge*; Costa, Conceição; Ratola, Ana; Rocha, Dallia; Santos, Helena
Metabolic Unit - Servico de Pediatria CHV/NI/LS/Espirito, Portugal

**PP023**
**THINK AGAIN.THINK NP-C**
Imrie, Jacqueline*; Mathiess, Toni; Evans, Miriam; Green, Jim
*NPUK, UK;
²NPDA, UK
THEMATIC STREAM: GENETICS (PP046-PP050)

PP046  LARSEN SYNDROME WITH SEIZURE: A CASE REPORT
Aurora, Sunaina1 Chacha Nehru Bal Chikitsalaya, Delhi, India

PP047  ALGORITHM OF RISK GROUPS FORMATION FOR HAVING CHILDREN WITH NEURAL TUBE DEFECTS AMONG REPRODUCTIVE AGE WOMEN AND DIFFERENTIATED APPROACH TO THE SPINAL DISRAPIA PREVENTION
Kotova, Natalya1; Malchuk, Yelena2; Kononenko, Natalya
Odessa National Medical University, Ukraine

PP048  FEATURES OF DISTRIBUTION OF HLA -- LOCI OF THE I CLASS AT CHILDREN WITH LUPUS AMONG KAZAKH AND RUSSIAN POPULATION
Ishuova, Pakhitkanym1; Maltassova, Raikhan; Toibayeva, Alina
Scientific Center of Pediatrics and pediatric Surgery, Kazakhstan

PP049  DENTINOGENESIS IN MUCOPOLYSACCHARIDOSIS
Boutrid, Nadia1; Rahmoun, Hakim; Bioud, Belkacem
University Hospital of Setif, Algeria

PP050  SCARCITY OF RARITY: A RECESSIVE FORM OF OSTEOPENIA IMPERFECTA
Boutrid, Nadia1; Rahmoun, Hakim; Bioud, Belkacem; Amrane, Mourina
University Hospital of Setif, Algeria

THEMATIC STREAM: SPORTS MEDICINE (PP051)

PP051  WATER ACTIVITIES AN EFFECTIVE LEARNING ENVIRONMENT FOR CHILDREN WITH VISUAL IMPAIRMENT
Almajan-Guta, Violeta1; Almajan-Guta, Violeta2; Slavici, Titus1; Ciuca, Ioana2
1 West University Timisoara, Romania; 2 Politehnica University, Cluj-Napoca, Romania

THEMATIC STREAM: Nephrology (PP052-PP055)

PP052  GENETIC POLYMORPHISM OF IL-8-251 AMONG PEDIATRIC PATIENTS WITH URINARY TRACT INFECTION
Stoilova, Tatianna; Papirko, Roman; Eriko, Weynlmi1; Vestyk, Natalia
Odessa National Medical University, Ukraine

PP053  RENAL BLADDER ULTRASONOGRAPHY AND LATE 6 MONTH-DMSA SCAN SCREENING FOR HIGH GRADE VESICOUTERELERAL REFUX AFTER FIRST FEBRILE URINARY TRACT INFECTION IN INFANTS AGED LESS THAN ONE YEAR
Wongbenchara, Krunued1; Tongsajalyai, Yoth; Na-rungrin, Kunyalak
Maharaj Nathon Ratrasama Hospital, Thailand

PP054  WITHDRAWN

PP055  THE IMPORTANCE OF RISING CHRONIC KIDNEY DISEASE (CKD) AWARENESS FOR YOUNG PEOPLE AND PARENTS, COPING AND HOW USING SOCIAL MEDIA CAN INFLUENCE CARE AND SHARED-DECISION MAKING DISEASE -- ORIGINAL ARTICLE
Muhammad, Shahid1; Sen, Barbara2
1 The Renal Patient Support Group (RPSG), UK; 2 The University of Sheffield, England UK, UK

Hall: Emirates Ballroom 3
13.30-14.30
Meeting on the Occasion of Excellence in Pediatrics: Breastfeeding Support for Preterm Infants - The Latest Insights on Breastfeeding Physiology
Speakers: Alan Lucas, United Kingdom; Mike Woolridge, United Kingdom
Industry sponsored symposium: detailed programme on page 78

Hall: Emirates Ballroom 5
13.30-14.30
Meeting on the Occasion of Excellence in Pediatrics: The Use of Evidence-Based Medicines in Pediatrics
Speakers: Andre Gossner, Germany; Stefan Zieslen, Germany & Michael. Popp, Germany
Industry sponsored symposium: detailed programme on page 78

Hall: Majlis 1
13.30-14.30
Meeting on the Occasion of Excellence in Pediatrics: Detecting Rare Diseases-You cannot recognize what you do not know
Moderators: Helen Foster, United Kingdom; Waseem Fathalla, United Arab Emirates; Anders Fasth, Sweden; Charles Marques Lourengo, Brazil & Stefano Bruni, Italy
Industry sponsored symposium: detailed programme on page 78

Hall: Salon 8A
14.00-17.30
The MENA Active Healthy Living Partnerships Summit
Co-Chairs:
1. Dimitri Christakis, Chairman of the Excellence in Pediatrics Institute
2. Robert Sallis, Chairman for the Exercise is Medicine Initiative, American College of Sports Medicine, USA
3. Jean Michel Borys, European Network Director, EPODE International Network, France
4. Timothy Oils, International Study on Childhood Obesity, Lifestyle and Environment, Australia
5. Nahlia Hewaia, Dean of the Faculty of Agricultural & Food Sciences, American University of Beirut, Lebanon

Speakers:
1. Pamela Ewan, United Kingdom & USA &
2. Phil Lieberman, USA & Pamela Ewan, United Kingdom

Remarks: Closed session - participation by invitation only

Hall: Emirates Ballroom 4
14.00-17.30
The Global Summit on Meningitis Jointly Held with the 2nd Middle East Leaders’ Forum on Meningitis (PART 2)

Co-Chairs:
1. Dimitri Christakis, MD, MPH, George Adkins Professor of Pediatrics, University of Washington & Director, Center for Child Health, Behavior, and Development, Seattle, USA
2. Muhammed-Kheir Taha, Invasive Bacterial Infections Unit, National Reference Center for Meningococci, Institut Pasteur, France
3. Catherine Weil Olivier, Professor of Pediatrics, Department of Pediatrics, Université Denis Diderot Paris VII, France

Remarks: Closed session - participation by invitation only

Hall: Emirates Ballroom 1 & 2
14.30-15.30
EIP Up to Date: Dealing with Allergies and Anaphylaxis in Children
Speakers: Phil Liewerman, USA & Pamela Ewan, United Kingdom
Anaphylaxis in Children: A Growing Concern (Phil Lieberman, USA)

Description
Allergic diseases are increasing worldwide especially in industrialized nations. Food allergy is no exception and the incidence of anaphylaxis in children appears to have risen steadily over the past several decades. Nonetheless, studies have shown that quite often anaphylatic episodes are poorly managed. They have also shown that children and adults differ in the causes of anaphylaxis. This lecture discusses the incidence, epidemiology, and treatment of children who have experienced anaphylactic events.

Learning Objectives
• Be able to consider whether allergy is likely to be involved
• The attendee will become familiar with the manifestations of anaphylactic events in children which can differ from those in adults
• The attendee will learn to properly treat an anaphylactic event

Dealing with Allergies and Anaphylaxis in children (Pamela Ewan, United Kingdom)

Description
The presentation will cover the range of allergic disorders presenting in children, including rhinitis, asthma, food, venom and drug allergy. There will be focus on food allergy and anaphylaxis with particular emphasis on peanut and nut allergy. Approach to diagnosis and management strategies including avoidance will be discussed.

Learning objectives
• Be able to consider whether allergy is likely to be involved
• Knowledge of the major allergens causing acute and chronic allergic disease
• Knowledge of allergy investigations and their interpretation

Hall: Emirates Ballroom 3
14.30-15.00 EiP Up to Date: Asthma Management for the Community Pediatrician
Speaker: Asma Al Nuaimi, United Arab Emirates

Description
In this presentation the different phenotypes of asthma and treatment options will be reviewed in a case-based format with highlights on different category of medications available to the community pediatrician.

Learning Objectives
• Understand different phenotypes of Asthma
• Step up and step down approach
• Gain confidence with optimal asthma management

Hall: Emirates Ballroom 6
14.30-15.00 EiP Up to Date: Pediatric Hip Disorders: Update 2014
Speaker: Junichi Tamai, USA

Description
Many patients with paediatric hip disorders initially present to the pediatrician. This presentation will review specific diagnostic features for each condition. In addition, cases will be used to highlight recent developments in the understanding and management of core paediatric hip disorders.

Learning Objectives:
• Anticipate certain hip conditions in children based on patient age
• Describe typical clinical findings associated with specific hip conditions in children
• Recognize the management components and goals involved in treating specific hip disorders in children

Hall: Emirates Ballroom 5
14.30-16.00 EiP Interactive Cases Series: ADHD Differential Diagnosis and Comorbidities: Case Presentations
Speaker: Tanya Froehlich, USA

Description
This interactive case series will provide an overview of best practice recommendations for identifying diagnosing ADHD in the primary care setting, with a focus on differentiating ADHD from important comorbid or mimicking conditions, such as oppositional defiant, anxiety, depressive, learning, and autism spectrum disorders.

Learning Objectives
• Understand best practice clinical guidelines for the diagnosis of ADHD
• Identify key areas of overlap in the presentation of ADHD and important comorbid and/or mimicking developmental-behavioral conditions (e.g., oppositional defiant, anxiety, depressive, learning, and autism spectrum disorders)
• Identify key features that distinguish ADHD from important comorbid and/or mimicking developmental-behavioral conditions (e.g., oppositional defiant, anxiety, depressive, learning, and autism spectrum disorders)

Hall: Majlis 2
14.30-16.00 Workshop on Personal Improvement: How to Write a Research Abstract for a Scientific Conference
Speaker: Megan A. Moreno, USA

Description
Writing an abstract of your research project to submit to a scientific conference is an important part of academic medicine. This workshop will provide step by step guidance in how to take your study results and create an abstract that is clear, organized and represents your best work.

Learning objectives
• Learn the structure and format of research abstracts
• Learn key components of your study that must be included in a scientific abstract
• Practice writing an abstract

Hall: Majlis 1
14.30-17.30 EiP School: Children's Environmental Health
Co-ordinators: Katherine M. Shea, USA; Irena Buka, Canada; Hawa-Hamisi Senkoro, Gabon

Description
We will explore the basic science and core concepts of children’s special vulnerabilities to environmental hazards. We will emphasize becoming familiar with resources available from the World Health Organization (WHO) that pediatric professionals can use for the benefit of children’s environmental health locally. Didactic, interactive, and participant lead sessions will enhance the learning experience.

Learning objectives
• Participants will understand the special vulnerabilities of children (from preconception through adolescents) to environmental hazards
• Participants will be familiar with the WHO Children’s Environmental Health (CEH) training modules and understand how they can be modified and applied to education of both professional and non-professional groups
• Participants will have knowledge of CEH resources (books/monographs/journals, websites, experts) available through WHO and other professional organizations.

Remarks:
Closed session for successful bursary applicants
Organised in collaboration with the World Health Organisation

Hall: Salon 8B
14.30-16.30 The Home Hygiene Forum
Chair: Prof. Charles P. Gerba, Dept. of Soil, Water and Environmental Science, University of Arizona, USA

Remarks:
Closed session - participation by invitation only
**Hall: Emirates Ballroom 3**
15.00-15.30  
**EIP Up to Date: pGALS – not just a Simple Clinical Skill ... a Role as a Triage Tool?**
Speaker: Helen Foster, United Kingdom

**Description**  
This session will describe pGALS, and it’s relevant in general paediatrics, both as clinical skill to detect significant joint disease and as a means to raise awareness of rheumatic disease in children.

**Learning objectives**  
- Be aware of the importance of musculoskeletal clinical examination as an integral skill  
- Be able to describe the components of pGALS to identify abnormal joints  
- Understand the role of pGALS as a triage tool to facilitate access to care

**Hall: Emirates Ballroom 6**
15.00-15.30  
**EIP Up To Date: Children and Junk food... Is it only the Extra Weight?**
Speaker: Dima Abe Saleh, Saudi Arabia

**Description**  
Junk food has become a prominent feature of the children diet all around the world. The amount consumed is greatly increased in the last few years, along with the obesity epidemic. Children who eat more fast food will consume more fat, more carbohydrates & more sugar. Having a diet high in fast food will not only increase the risk of over-weight, it also can be addictive leading to other complications such as high cholesterol, high blood pressure, pre-diabetes, vitamins or minerals deficiencies, chronic constipation, low concentration level & depression. In this lecture, we will review some mental and physical effect of junk food on children & adolescences.

**Learning Objectives**  
- What is junk food?  
- How junk foods contribute to over weight?  
- What are the other health risks that Junk food my cause?  

**Hall: Emirates Ballroom 1 & 2**
15.30-16.00  
**EIP Up To Date: Pediatric Electronic Medical Records; Back to the Future**
Speaker: Salah Eldin. Hussein, United Arab Emirate

**Description**  
Electronic medical record adoption in the region is increasing and transfer from paper chart to electronic data requires a lot of resources and efforts. Physicians play a pivotal role in this. Pediatricians are affected by this transfer and special standards are needed in the pediatric electronic medical records. The field is developing fast and pediatricians need to be more involved in all future developments.

**Learning objectives**  
- EMR pros and cons and adoption lessons  
- Standard of EMR in pediatrics  
- Ethical and legal dilemmas

**Hall: Emirates Ballroom 3**
15.30-16.30  
**EIP Up To Date: Human Papillomavirus (HPV)**  
Speakers: Margaret Stanley, United Kingdom & Joanne Yarwood, United Kingdom

**Understanding HPV vaccines (Margaret Stanley, United Kingdom)**

**Description**  
The human papillomavirus (HPV) is a causal agent in 5% of all cancers. Two licensed prophylactic vaccines target infection by the most prevalent oncogenic HPV’s 16 and 18 one also targets HPV’s 6 and 11 the cause of genital warts. These vaccines, generate strong immunity have a good safety profile and vaccine impact on disease is being demonstrated.
Learning Objectives:
• In this review, a description is given on the virological, clinical & epidemiological features of the emerging MERS-CoV disease
• Travel advice and guidelines are given for travelers to avoid the MERS-CoV infection
• A comparison is made between MERS-CoV and the Severe Acute Respiratory Syndrome Coronavirus (SARS-CoV) first detected in China a decade ago

Hall: Emirates Ballroom 5
16.00-17.30
EIP Interactive Case Series: Food Allergy and Acute Reactions – Getting the Diagnosis and Management Right

Speaker: Pamela Ewan, United Kingdom

Dealing with Allergies and Anaphylaxis in children (Pamela Ewan, United Kingdom)

Description
The presentation will cover the range of allergic disorders presenting in children, including rhinitis, asthma, food, venom and drug allergy. There will be focus on food allergy and anaphylaxis with particular emphasis on peanut and nut allergy. Approach to diagnosis and management strategies including avoidance will be discussed.

Learning objectives
• Be able to consider whether allergy is likely to be involved
• Knowledge of the major allergens causing acute and chronic allergic disease
• Knowledge of allergy investigations and their interpretation

Hall: Emirates Ballroom 1 & 2
16.30-17.30
EIP Up to Date: Breastfeeding

Speakers: Richard J. Schanler, USA & Arthur I. Eidelman, USA

Prevent Breastfeeding tragedies by sound knowledge of human milk and lactation (Richard J. Schanler, USA)

Description
Each year many newborn infants are readmitted to the hospital soon after birth because of dehydration, severe hyperbilirubinemia, and hypernatremia. The most at risk infants are those born near term (the late preterm infant) who are breastfeeding and who already have significant jaundice before discharge. Pediatricians lead the health care team for the infant. Their team should have firm knowledge of milk production, and its consequences if there is impaired lactation. The team also has to be cognizant of hospital policies, the rationale for breastfeeding, and the obstacles in its promotion early in the newborn period.

Learning Objectives
• To recognize how impaired lactation performance can lead to tragic consequences
• To understand the role of the pediatrician in preventing such tragic consequences
• To understand how to promote physician education and knowledge about breastfeeding

The Latest Research on Breastfeeding: Does It Have any Practical Implication for The Clinician (Arthur I. Eidelman, USA)

Description
Selected research articles on breastfeeding, human milk and lactation published in the past 12 months will be reviewed and evaluated. Studies discussed will be limited to research on humans and will include data from clinical studies, epidemiologic surveys and innovative public health programs

Learning Objectives
• Update the clinician as the results of recently published research studies
• To analyze research results as to their practical application for the management of the breastfeeding maternal-infant dyad
• To explore the limitations of the studies so as to direct direction of future studies
THEMATIC STREAM: MEDICAL EDUCATION (PP076-PP079)

PP076
AFFECTIONS, DISAFFECTIONS AND RELATIONSHIP ABUSE IN ADOLESCENCE
Ferreira, Manuela1; Lopes, Ana; Aparicio, Graça; Duarte, João; Cabral, Lidia
Instituto Politécnico do Viseu, Portugal

PP077
KNOWLEDGE OF GENERAL PRACTITIONERS AND MEDICAL STUDENTS REGARDING THE DIAGNOSIS AND TREATMENT OF ANAPHYLAXIS
Bekdas, Mervan1; Dilik, Mustafa2; Acıkel, Engin1; Agładay, Bilal1; Er Kokçoğaç, Mustafa1
Departments of Pediatrics, Abant Izzet Baysal University Faculty of Medicine, Bolu, Turkey.
1Family Physician, Bahcelievler Family Health Center, Bolu, Turkey; 2Medical Student, Abant Izzet Baysal University Faculty of Medicine, Bolu, Turkey

PP078
KNOWLEDGE, PERCEPTION AND ATTITUDE OF PEDIATRICS HEALTH CARE PROVIDERS TOWARDS EVIDENCE-BASED PRACTICE IN QATAR
Masoud, Hanaa1; Al-Hammadi, Ahmad1; Hassan, Mansik1; Magbou, Samar1; Sankar, Jisha1; Abdelgalad, Fayha1
Hamad Medical Corporation, Qatar

PP079
THE CHALLENGES OF IMPLEMENTING EVIDENCE-BASED MEDICINE AMONG PEDIATRICS HEALTH CARE PROVIDERS IN QATAR
Dala, Amar1; Al-Hammadi, Ahmad1; Masoud, Hanaa1; Baker, Laila1; Habra, Basil1; Musa, Sara1
Hamad Medical Corporation, Qatar

THEMATIC STREAM: NEONATOLOGY (PP080-PP084)

PP080
NEONATAL AMOEBIASIS MAY NOT BE AS RARE AS WE THOUGHT. A CASE SERIES
Abusalah, Zahreddin1
Consultant Neonatologist, Mediclinic City Hospital, Dubai, United Arab Emirates

PP081
PENTOXIFYLLINE ADMINISTRATION IN NEONATAL INFECTIONS, PREMATURE TREATMENT IN ROMANIA CASE REPORT
Rusu, Camelia1; Szabo, Jozsef1; Yacoob, Ismail12
1NICU/Emergency Hospital/Oradea, Romania; 2Dr Pop Micu1; Municipality Hospital of Marghita, Romania

PP082
WITHDRAWN

PP083
SHORT-TERM OUTCOMES RELATED TO WHEEZING, ASTHMA AND ATOPY IN PREMATURE INFANTS
Unal, Sevim1; Kaya Aysiner1; Bilgin, Leyla1; Misirlioglu Emine1; Kocabas, Can Naci1
Ankara Children's Hematology Oncology Research Hospital, Turkey

PP084
A RARE CAUSE OF HYPERTENSION IN A NEWBORN: ADRENAL HEMORRHAGE
Goksugur, Sevli Bilir1; Bekdas, Mervan1; Yorgun, Melike1; Altunhan, Huseyin1; Karatas, Zehra1; Dilik, Mustafa2; Demircioglu, Fatih3
1Department of Pediatrics, Abant Izzet Baysal University Faculty of Medicine, Bolu, Turkey; 2Department of Pediatrics, Izzet Baysal State Hospital, Bolu, Turkey

THEMATIC STREAM: NEUROLOGY / NEURODEVELOPMENTAL PEDIATRICS (PP085-PP089)

PP085
CLINICAL, BIOCHEMICAL, AND MOLECULAR STUDIES IN PYRIDOXINE-DEPENDENT EPILEPSY: REPORT OF 12 CASES
Al Bulushi, Bashara1; Al Shawan, Saad1; Al Ghandi, Abdulaziz1; Hundalha, Khaled1; Al Hashmi, Amal1; Al Mutari, Fuad1; Tabarki Malaki1; Brahim1
Princess Sultan Military Medical City, Saudi Arabia

THEMATIC STREAM: OTHER (PP090-PP099)

PP090
THE LINK BETWEEN INFANT MORTALITY RATES AND POVERTY IN AFRICA
Lawson, Ponnie1
Nottingham Trent University, UK

PP091
WITHDRAWN

PP092
FACTORS ASSOCIATED WITH ADOLESCENT STUDENTS USE OF SCHOOL-BASED SALAD BARS
Andersen, Lori1; Johnson, Carolyn C1
Tulane University School of Public Health and Tropical Medicine, USA

PP093
THE ESSENTIALS OF PRI-DISCHARGE PATIENT EDUCATION
Lim, Tammy1; Lee, Je Ying1; Liu, Martha Lina1; Ong, Hian Tat1
National University Health System, Singapore

PP094
WITHDRAWN

PP095
DEVELOPING A PEDIATRIC SPECIALLY FOCUSED MODULE FOR EMR
Hutcheson, Kelly1; El Shahabi, Nader2; Chitlangia, Mohit1; Poudel, Prakash1, Chittangla, Mohit1
B.P. Koirala Institute of Health Sciences, Nepal

PP096
QUALITATIVE ASSESSMENT OF THE EDIBLE SCHOOLYARD PROGRAM IN NEW ORLEANS, LOUISIANA, USA BY PARENTS, TEACHERS AND STUDENTS
Mundorf, Adrienne1; Chitlangia, Mohit1; Poudel, Prakash1; Barrows, J. D.1; Taylor, Michael1; Ankrah, Jacob1; B.P. Koirala Institute of Health Sciences, Nepal

PP097
THE ENDOLARYNGOSCOPY IMPORTANCE IN EARLY CHILDHOOD.
Bogomilsky, Mikhail1; Vasin, Anna; Radtiger, Elena2
Russia national research medical university, Russia

PP098
APPLICATION OF GOLIMUBA IN JUVENILE ARTHRITIS PATIENT
Dolgikh, Vladimir1; Pogodina, Anna; Rychkova, Ljubov; Knyazeva, Tatjana; Mandzyak, Tamara1
Scientific Center Of Family Health And Human Reproduction Problems, Russia
**PP099**

**USING BABY AND TATTY BUMPKIN SESSIONS IN PRIVATE CLASSES, NURSERIES AND CHILDREN CENTRES TO ENCOURAGE ‘WELLBEING’, FAMILY BONDS AND THE EARLY LEARNING PROCESS.**

Heron, Susan*

Head of Training Tatty Bumpkin Ltd. M.C.S.P.

**THEMATIC STREAM: PULMONOLOGY (PP100-PP104)**

**PP100**

**FACTORS INFLUENCING THE SEVERITY OF ASTHMA EXACERBATION**

Buzoianu, Eugenia1; Moiceanu, Ana1; Moiceanu, Mariana1; Hurduc, Victoria1; Plesca, Vlad1; Cora, Felicia1; Placsca, Doina1

1University of Medicine and Pharmacy “Carol Davila”, Bucharest, Romania;

*Dr. Victor Gomou” Clinical Children’s Hospital, Romania

**PP101**

**TIMING OF SURGERY IN NEWBORNS WITH CONGENITAL DIAPHRAGMATIC HERNIA**

Gvetadze, Paata1; Adania, Nino4; Kharashvili, Leri1; Manjavidze, Nina1; Ghughunishvili, Mariam3

1M. Iashvili Central Children Hospital, Republic of Georgia;

2Tbilisi State Medical University, Republic of Georgia;

3M. Iashvili Central Children Hospital, Department of Respiratory Medicine, Republic of Georgia

**PP102**

**CHARACTERISTICS OF PATIENTS WITH CYSTIC FIBROSIS: A REVIEW OF 18 CASES**

Khalil, Fatma1; Boussetta, Abir; Hammouda, Samia; Brini, Inas; Belhadj, Iman; Bensessaoud, Taleb; Tissia, Faten; Boussetta, Khadija

Children’s hospital of Tunis, Tunisia

**PP103**

**A CLINICAL CASE OF CONGENITAL LOBE EMPHYSEMA**

Bulegenova, Minira1; Mahneva, Anna; Bekisheva, Aigul; Mahneva, Anna1; Bulegenova, Minira

Scientific center of pediatrics and childrens surgery, Kazakhstan

**PP104**

**CORRELATION BETWEEN THE SEVERITY OF ASTHMA EXACERBATION AND FENO VALUE**

Plesca, Doina1; Buzoianu, Eugenia1; Moiceanu, Marian1; Moiceanu, Ana1; Plesca, Vlad1; Cora, Felicia1

1University of Medicine and Pharmacy “Carol Davila”, Romania;

*Vctor Gomou” Clinical Children’s Hospital, Romania

**THEMATIC STREAM: CHRONIC DISEASES (PP105)**

**PP105**

**SOCIAL, PSYCHOLOGICAL AND FINANCIAL BURDEN ON PARENTS OF CHILDREN WITH CHRONIC ILLNESS.**

Khanna, Ankush1; Prabakharan, Anusha; Patel, Priyanka; Ganjewala, Jaishree; Nimalkar, Somashkehkar

1Pramukhswami Medical College, India

**Hall: Emirates Ballroom 6**

**08.30 - 10.00**

**Oral Presentations – Best Abstracts (OP13-OP18)**

Co-Chairs: Megan A. Moreno, USA & Roy K. Phillip, Ireland

**THEMATIC STREAM: NEONATOLOGY (OP13-OP17)**

**OP13**

**COMPARISON OF POLYTHENE OCCLUSIVE SKIN WRAPPING WITH ROUTINE CLOTH WRAPPING IN REDUCING HEAT LOSS DURING TRANSPORTATION IN PRETERM NEONATES (<34 WEEKS) AFTER DELIVERY: RANDOMIZED CONTROL TRIAL.**

Nimbalkar, Somashkehkar1; Khanna, Ankush1; Patel, Dipen1; Nimalkar, Archana1; Phatak, Ajay2

1Pramukhswami Medical College, India;

2Charutar Arogya Mandal, India

**OP14**

**REPORT ON KANGAROO CARE PRACTICES IN A TERTIARY LEVEL NICU IN WESTERN INDIA - SCOPE FOR IMPROVEMENT.**

Amin, Anies2; Patel, Dipen1; Shah, Nikhil1; Phatak, Ajay1; Nimalkar, Somashkehkar1

Pramukhswami Medical College, India;

Charutar Arogya Mandal, India

**OP15**

**A PROSPECTIVE STUDY OF NOSOCOMIAL INFECTION IN A NEONATAL INTENSIVE CARE UNIT(NICU)**

Mallick, Pranab Kanti*

Associate Professor & Head Dept. Of child Health, BGC trust Medical College, Chittagong, Bangladesh

**THEMATIC STREAM: MEDICAL EDUCATION (OP13-OP17)**

**OP18**

**THE TRAINING AND CAREER PATHS OF CANADIAN PAEDIATRIC RESIDENTS, 2004-2010**

Hameed, Tahir1; Lawrence, Sarah2; CPPDRG3

1King Abdulaziz Medical City-Riyadh/King Saud bin Abdulaziz University for Health Sciences, National Guard Health Affairs, Saudi Arabia;

2children’s Hospital of Eastern Ontario/University of Ottawa, Canada;

3Canadian Pediatric Program Directors Research Group, Canada

**Hall: Majlis 1**

**08.30-10.00**

**EIP Special Interest Group: Sepsis**

Chair: Lokesh Tiwari, India

Description

Globally, sepsis is one of the leading causes of death in hospitalized neonates, children and adults. It is a medical emergency that can present in any patient and in any setting. Sepsis being major killers globally, fighting sepsis is one of the highest priority areas for health care professionals across the world.

The Special Interest Group (SIG) on sepsis is a collection of health care providers who share a common interest in improving the care and management of sepsis in children. Together we learn from each other and come out with new ideas to prevent, suspect and treat sepsis. Goal is to develop consensus on the latest understanding of key clinical issues, recommendations on practice guidelines and resources for frontline clinicians, researchers and intensivists worldwide.
If diaper dermatitis does not respond to treatment, what differential should be considered?

How can you best manage diaper rashes?

What causes common diaper rash?

Is there a link between AD and diet? Does dietary modification help AD?

If it is not AD, what are the differential diagnoses or AD look-alike conditions?

What complications can arise from AD? And how to manage them?

Atopic Dermatitis

Questions put to the panel to include:

- Global challenges and strategies to fight sepsis particularly in resource limited countries.
- Current management protocols.
- Breakthrough research in the field of sepsis.
- Magnitude of sepsis (global and/or country specific).
- Science of sepsis in children.
- Description
- Strategies for Managing Acne (Ali Alraddadi, United Arab Emirates)

HALL: Majlis 2

EIP Special Interest Group: Biotin Thiamine Responsive Basal Ganglia Disease—A Step Toward Improvement of Care

Chair: Majid Alkadhe, Saudi Arabia

Co-chairs: Waleed Twalijri, Saudi Arabia & Mohammed T. Al Rifai, Saudi Arabia

HALL: Emirates Ballroom 5

Atopic Dermatitis and Diaper Rashes Roundtable: Expert Advice on Answering Common Infant Skincare Questions from Parents

Moderator: Sultan Al-Khenaizan, Consultant Dermatologist, King Abdulaziz Medical City, Assistant Professor, King Saud Bin Abdulaziz University for Health Sciences, Riyadh, Saudi Arabia

Panel:
- Cui Yutao, Director of Pediatrics, Department of Beijing United Family Hospital, China
- Rachmi Sarkar, Department of Dermatology, Maulana Azad Medical College & LNJP Hospital, New Delhi, India. She is National Joint Secretary, Indian Association of Dermatology, Venereology and Leprology 2012 and Vice President, New Delhi Branch of IADVL, India
- Vibhu Mendiratta, Professor, Department of Dermatology at Lady Hardinge Medical College, New Delhi, India
- Ali Alraddadi, Saudi Dermatology Society’ Vice President, Consultant & Section Head of Dermatology, KAMC, King Abdulaziz Medical City, Jeddah, Assistant Professor - King Saud Bin Abdulaziz University for Health Sciences – Jeddah, Saudi Arabia
- Lin Ma, Professor, Director Department of Dermatology, Capital Medical University, Beijing Children’s Hospital, China
- Zi-Gang Xu, Vice-director, Professor, Department of Dermatology, Beijing Children’s Hospital, Capital Medical University, China
- Yuan Liang, Pediatric dermatologist of department of dermatology, Beijing Children’s Hospital, China

Description

Questions put to the panel to include:

- Atopic Dermatitis
- How and when does AD present? How to diagnose it?
- What complications can arise from AD? And how to manage them?
- How to manage AD? And what are the treatment options?
- If it is not AD, what are the differential diagnoses or AD look-alike conditions?
- Is there a link between AD and diet? Does dietary modification help AD?

Diaper Rashes

- What causes common diaper rash?
- What are the other causes for diaper dermatitis?
- How can you best manage Diaper rashes?

If diaper dermatitis does not respond to treatment what differential should be considered?
Early diagnosis is a key factor for favorable treatment response.

Understanding of the disease mechanisms is a key element to identify principles of treatment if the correct diagnosis is achieved before irreversible damage to the central nervous system and other organs occur.

Learning Objectives
- Identify key clinical features in the investigation of patients with suspicion of a hereditary metabolic disease that are helpful for the general pediatrician.
- Summarize current diagnostic methods for patients with inborn errors of metabolism (IEM).
- Describe the main diagnostic challenges in recognizing the multi-system nature of many IEM and the role of the physician in the diagnostic paradigm.

Light at the end of the tunnel: targeted treatment modalities for some metabolic diseases (Fathiya Al Murshedi, Oman)

Description
The presentation will review the general pathophysiology mechanisms in metabolic diseases which are the basics for general and targeted treatment modalities. It will go over some examples of successful treatment modalities for some specific metabolic conditions with emphasis on the importance of timing of initiating treatment as a key factor for response.

Learning objectives
- Overview on the expansion of number of metabolic diseases with promising therapies and treatment outcomes.
- Understanding of the disease mechanisms is a key element to identify principles of therapy and deliver appropriate treatment.
- Early diagnosis is a key factor for favorable treatment response.

Hall: Emirates Ballroom 5
10.30-12.00
EIP Interactive Case Series: Mood Disorders in Children and Adolescents
Speaker: Fadi Maalouf, Lebanon

Description
This presentation will cover the different mood disorders in children and adolescents, namely Major Depressive Disorder, Bipolar Disorder and the newly introduced Disruptive Mood Dysregulation Disorder. It will focus on risk factors, common presenting symptoms, course and treatment.

Learning objectives
- By the end of this presentation, attendees should be able to:
  - Identify warning signs and triggers for referral to specialized care.
  - Appreciate the difference among the clinical pictures of the different mood disorders.
  - Become familiar with evidence-based treatment guidelines for the most common mood disorders in children and adolescents.

Hall: Emirates Ballroom 6
10.30-12.00
Workshop: Principles of Selective and Judicious Use of Antibiotics in Children
Speaker: Ahmed Al Suwaidi, United Arab Emirates

Description
The workshop will cover the principles of selective and judicious use of antibiotics in children. It will focus on the importance of appropriate use of antibiotics to prevent the development of antibiotic resistance.

Learning objectives
- Identify key clinical features in the investigation of patients with suspicion of a hereditary metabolic disease that are helpful for the general pediatrician.
- Summarize current diagnostic methods for patients with inborn errors of metabolism (IEM).
- Describe the main diagnostic challenges in recognizing the multi-system nature of many IEM and the role of the physician in the diagnostic paradigm.

Mood Dysregulation Disorder. It will focus on risk factors, common presenting symptoms, namely Major Depressive Disorder, Bipolar Disorder and the newly introduced Disruptive Mood Dysregulation Disorder. It will focus on risk factors, common presenting symptoms, course and treatment.

Learning objectives
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- Understanding of the disease mechanisms is a key element to identify principles of therapy and deliver appropriate treatment.
- Early diagnosis is a key factor for favorable treatment response.
Friday, 5 December 2014

Scientific Programme

11.30-12.00
EiP Quiz the Expert: Infectious Diseases
Chair: Nawal Al Kaabi, United Arab Emirates
Case Presenters: Fatima Al Jaberi, United Arab Emirates & Ayesha Al Muhairi, United Arab Emirates

11.30-12.00
EiP Quiz the Expert: Allergies
Chair: Bassam Mahboub, United Arab Emirates

11.30-12.00
EiP Quiz the Expert: Infectious Diseases
Chair: Nawal Al Kaabi, United Arab Emirates
Case Presenters: Fatima Al Jaberi, United Arab Emirates & Ayesha Al Muhairi, United Arab Emirates

11.30-12.00
EiP Quiz the Expert: Allergies
Chair: Bassam Mahboub, United Arab Emirates

12.00 – 12.30
PRAYER TIME

12.30 - 13.00
LUNCH BREAK

13.00-14.00
Meeting on the Occasion of Excellence in Pediatrics: Home Hygiene - Practical Advice for Pediatricians to Provide to New Parents
Speakers:
Prof. Charles P. Gerba, Dept. of Soil, Water and Environmental Science, University of Arizona, USA
Dr Andrew Carr, Principal Scientist, Clinical Research, P&G Baby Care

14.00-14.30
EiP Up To Date: Rapid Diagnostic Tests for Influenza and Invasive Bacterial Infections
Speakers: Muhamed Kheir Taha, France & Catherine Weil Olivier, France

Scientific Information

Rapid Diagnostic Tests (RDT) for Influenza (Catherine Weil Olivier, France)

Description
Seasonal influenza is a frequent disease in young children during epidemics periods. Clinical diagnosis may be difficult in the youngest, under 5 years of age, due to the non specifcity of symptoms. RDT for influenza have proven their high level specificity and good sensitivity against influenza types A and B in children. Data show they may both prevent antibiotic prescriptions and other diagnostic investigations, and facilitate the indication of specific antiviral treatment.

Learning Objectives
• During an seasonal epidemics, RDT are of valuable help at the bed side
• RDT transform a clinical syndrom in a confirmed disease
• RDT allow a reduction of antibiotic consumption and diverse diagnostic procedures and facilitate the indication of specific influenza anti-virals

Rapid Diagnostic Tests (RDT) for Invasive Bacterial Infections (Muhamed-Kheir Taha, France)

Description
Diagnosis of Invasive Bacterial Infections (IBI) impacts on management and surveillance of vaccine preventable IBI caused by Neisseria meningitidis, Hemophilus influenzae and Streptococcus pneumoniae. RDTs that are based on immunochromatography have been recently developed with good specificity and sensitivity. RDTs should improve case management and enhance monitoring of epidemiological changes.

Learning Objectives
• RDTs are bedside tests, provide results within 10-15 minutes and don't require extensive training to be employed.
• RDTs enhance epidemiological surveillance particularly in remote areas.
• RDTs allow adapting antibiotic use to avoid unnecessary consumption of broad spectrum antibiotics.

14.00-15.00
EiP Up To Date: Autism and ADHD
Speakers: Ahmad M. Almal, United Arab Emirates & Tanya Froehlich, USA

Autism Spectrum Disorders (ASD) Updates, Facts and Fiction (Ahmad M. Almal, United Arab Emirates)

Description
Based on most recent research papers, this session will cover latest information on clinical presentation, course, DSM changes, epidemiology, etiology, differential diagnosis, co-morbidities, and treatment recommendation for ASD. There will be tables and summary of symptoms severity of ASD and a review of psychopharmacology trials.

Learning Objectives
• Discuss recent developments in ASD based on recent important research papers.
• Explain practice parameters and explain developments in transition to DSMV.
• Describe advances relevant to our understanding of ASD and management.

ADHD in Adolescence: Update on Diagnosis and Treatment (Tanya Froehlich, USA)

Description
This session will review recent literature on the diagnosis and treatment of ADHD in adolescence. Topics covered will include how the presentation of ADHD and its recommended diagnostic procedures differ in adolescence versus earlier childhood, as well as how to address family concerns about substance abuse and ADHD medication treatments.

Learning Objectives
• Understand the typical developmental course of ADHD symptoms from early childhood to adolescence
• Understand best practice clinical guidelines for the diagnosis of ADHD in adolescents, including how recommendations differ from those of younger school age children
• Understand best practice recommendations for the treatment of ADHD in adolescents, including which medication treatments have less abuse potential

Scientific Programme

Friday, 5 December 2014
Scientific Programme

Friday, 5 December 2014

Hall: Emirates Ballroom 5

Workshop: Knee Exam
Speaker: Robert E. Sallis, USA

Description
This workshop will offer a step by step approach to the history and exam of the injured knee.

Learning Objectives
• Review important history question in the evaluation of the injured knee
• Demonstrate x-ray findings for common knee problems

Hall: Emirates Ballroom 6

Workshop: Children with Dysmorphic Features: Diagnosing Genetic Syndromes with your Eyes
Speaker: Charles Marques Lourenço, Brazil

Description
There are a number of inborn errors of metabolism (IEM) with recognized distinctive dysmorphic features, specially - but not only - the ones involving lysosomes and peroxisomes. Other IEM can present with some dysmorphic features that can lead the physician towards the correct diagnosis of the patient showing that these group of diseases can contribute to our understanding of the impact of impaired biochemical pathway on the morphogenesis and dysmorphogenesis. In this workshop, we will highlight the main IEM with distinctive dysmorphic features and diagnostic approaches for those disorders that are sometimes specific for each one.

Learning Objectives
• Describe the main dysmorphic features associated with IEM and the importance of early diagnosis (“diagnosing with your eyes” first step approach)
• Assess case studies inclusive of patients and the diagnostic approaches
• Present some clinical interventions able to optimize clinical outcomes in some EIM with dysmorphic features

Hall: Majlis 2

The 3rd Global HPV Vaccination Summit jointly held with the 2nd ME Leaders’ Forum on HPV

Co-chairs:
1. Dimitri Christakis, MD, MPH, George Adkins Professor of Pediatrics, University of Washington & Director, Center for Child Health, Behavior, and Development, Seattle, USA
2. Catherine Wolf Ollivier, Professor of Paediatrics, Department of Paediatrics, University Denis Diderot Paris VII, France
3. Margaret Stanley, OBE FMAdSci HonFRCOG, Director of Research, Department of Pathology, University of Cambridge, United Kingdom
5. Shamsa Adbul Rahman Al Awar, Assistant Professor, Department of Obs/Gyn, CMHS College of Medicine and Health Science, United Arab Emirates

Remarks: Closed session - participation by invitation only

Scientific Information
Learning objectives
Review the etiology and pathogenesis of bronchiectasis. Discuss the role of the pediatrician on the prevention and management of bronchiectasis. Present the latest advances in the management of cystic fibrosis and bronchiectasis.

Hall: Emirates Ballroom 6
15.30-16.00 EiP Quiz the Expert: Rare Diseases
Chair: Fuad Al Mutairi, Saudi Arabia
Case Presenter: Abdulrahman Bin Hussain, Saudi Arabia

Hall: Emirates Ballroom 5
15.30-16.00 EiP Quiz the Expert: Management of Status Asthmaticus
Chair: Asma Al Nuaimi, United Arab Emirates
Case Presenters: Khoulia Al Bloushi, United Arab Emirates & Sara Al Junaidi, United Arab Emirates

Exhibition Hall – Emirates Ballroom Foyer
16.00-16.30 COFFEE BREAK

Hall: Emirates Ballroom 1 & 2
16.30-17.30 EiP Up To Date: RSV Bronchiolitis – Preventive Strategies and Current Evidence
Speaker: Roy K Philip, Ireland

Description
Respiratory syncitial virus (RSV) is the commonest cause of bronchiolitis. Premature infants, those with haemodynamically significant congenital heart disease and broncho-pulmonary dysplasia are particularly vulnerable. There is no effective vaccination, pharmacological interventions are supportive and ventilatory modalities assist in the management during increasing illness severity. Immunoprophylaxis with monoclonal antibodies (Palivizumab) is beneficial on clinical and health economic terms. Current evidence-based guidelines and risk-scoring would be discussed.

Learning Objectives
• RSV prevention strategies
• Review of immunoprophylaxis guidelines
• Management of bronchiolitis - current evidence

Hall: Emirates Ballroom 6
16.30 -18.00 Workshop: Paediatric Office Tools for Asthma Management
Speakers: Nizar Kherallah, Qatar & Asma Al Nuaimi, United Arab Emirates
Demonstrators: Maria Cristina Mendoza, United Arab Emirates & Nesreen Alhaj, United Arab Emirates

Description
Despite our great understanding of asthma pathogenesis and its therapy, the management of asthma remain suboptimal worldwide. Some of the factors associated with poor asthma management may be attributed to healthcare professionals not having the tools, the knowledge or the time to effectively assess the severity and the control of their asthmatic patients. This workshop is develop to arm the pediatrician and office staff with the needed knowledge to be able to perform office spirometry, exhaled nitric oxide measurement, asthma control test and to be able to instruct patients on the proper use of their asthma devices.

Learning Objectives
• Define asthma control and identify the tools available for its measurement
• Review asthma medications and devices
• Hand-on practice on the asthma medication devices, PFM, spirometry, FeNO and ACT

Hall: Emirates Ballroom 5
16.30 -18.00 EiP Interactive Case Series: When to Worry About Immunodeficiency? Approach to the Child with Recurrent Infections
Speaker: Anders Fasth, Sweden

Description
During childhood the child experiences many infections, mainly of the respiratory tract and of viral etiology. The high infectious rate might raise the question that something is wrong. A primary immunodeficiency (PID) is a rare explanation, but must not be missed owing to its severe consequences for the future of the child: Organ damage and possible early death. The session will teach you how to approach the child with repeated infections in different age groups.

Learning Objectives
• To know the frequency and type of infections among normal children according to age
• To know the warning signs for primary immunodeficiencies, i.e. to understand when to suspect and to investigate a child for a possible immunodeficiency as well as know important differential diagnosis
• To have knowledge about the primary immunodeficiencies that are typical for different age groups
Scientific Programme
Saturday, 6 December 2014

HALL: MAJILIS 1
08.00-10.30
EIP School: Programme Planning, Implementation, and Evaluation (PART 3)
Co-ordinators: Frederick A. Connell, USA & Kenneth Sherr, USA

Description
This course is designed to enhance participants’ abilities to develop, implement and evaluate programmatic solutions to public health problems they encounter as paediatricians.

Learning Objectives
Through course lectures, discussion, and application of material covered in the course to ameliorate a problem of public health importance, by the end of the course participants will be able to:
• Formulate program needs and formulate appropriate program interventions in response to these needs
• Define logistic, training and resource requirements to implement a program intervention
• Identify and define strategies to engage diverse program stakeholders
• Formulate a monitoring and evaluation logic model

Remarks:
Closed session for successful bursary applicants

HALL: MAJILIS 2
08.00-10.30
Oral Presentations – Best Abstracts (OP25-OP34)
Co-Chairs: Terence Stephenson, United Kingdom & Helen Foster, United Kingdom

THEMATIC STREAM: NEPHROLOGY (OP25-OP26)

OP25
RELATIONSHIP BETWEEN MICROALBUMINURIA AND KIDNEY SCARS IN CHILDREN WITH VESICOURETERAL REFLUX
Mortazavi, Fakhroosadat1; Zakeri, Roya
Tabriz University of Medical Sciences, Iran

OP26
HIGH PREVALENCE OF M damning HYDRATION DEFICIT IN EGYPTIAN SCHOOLCHILDREN
Gouda, Zaghloul1; Zarea, Mohamad; El-Hennawy, Usama1; Villard, Malania1; Constant, Florence2; Hawli, Nasrin1; Friedlander, Gerard1
1 Department of Nephrology, Damahour Medical National Institute, Damahour, Egypt;
2Institutefor European Expertise in Physiology, Paris, France;
3Nestlé Waters, Issy Les Moulinaux, France;
4Dept Physiology & Radio-isotopes, European Hospital Georges-Pompidou /Inserm U845, Faculty of Medicine Paris Descartes, France

THEMATIC STREAM: HEMATOLOGY & ONCOLOGY (OP27)

OP27
HEMATOLOGICAL PARAMETERS IN TRISOMY 21 VERSUS HEALTHY CHILDREN - A COMPARATIVE ROMANIAN STUDY
Vlad, Raucu Maria1; Grigorescu Sido, Paula2; Bucurcan, Simona2; Al - Khzouz, Camelia1; Nascu, Ioana1; Oraseanu, Dumitru1
1Pediatrics Department, Grigore Alexandrescu Emergency Children’s Hospital, UMF Carol Davila, Bucharest, Romania;
2Department of Genetics, Emergency Children’s Hospital, UMF Iuliu Hatagi, Cluj Napoca, Romania

THEMATIC STREAM: INFECTIOUS DISEASES (OP28)

OP28
HEALTH SEEKING BEHAVIOUR OF CAREGIVERS WHOSE CHILDREN (6 - 60 MONTHS) PRESENTED WITH SEVERE MALARIA IN A TERTIARY HEALTH INSTITUTION IN NIGERIA
Nwaneri, Damlin1; Sadoh, Ayebi
Institute of Child Health, University of Benin, Nigeria

THEMATIC STREAM: ENDOCRINOLOGY (OP29)

OP29
THE RELATIONSHIP BETWEEN OBESITY AND CAROTID EXTRA-MEDIAL THICKNESS IN CHILDREN AND ADOLESCENTS
Bekdæs, Mervan1; Kaya, Erhan1; Dagystan, Emin1; Goksugur, Sevi1; Demircioglu, Patih1
1Abdi Izzet Bayaz University Faculty of Medicine Department of Pediatrics, Turkey;
2Abant Izzet Bayaz University Faculty of Medicine Department of Radiology, Turkey

THEMATIC STREAM: CHILDREN’S ENVIRONMENTAL HEALTH (OP30)

OP30
AN ASSESSMENT OF HEALTHFUL SCHOOL ENVIRONMENT IN ENUGU EAST NIGERIA
Bisi-Onyemaechi, Adaobil1; Ikauna, A.N.1; Akani, N.A.1; Tagbo, B.N.1; Chinawa, J.M.1
University of Nigeria Teaching Hospital, Nigeria;
2Port Harcourt Teaching Hospital, Nigeria

THEMATIC STREAM: CARDIOLOGY (OP31)

OP31
BLOOD PRESSURE IN CHILDREN: ROLE OF HIGH ALTITUDE?
Shah, Syed1; Othaij, Abderrahim; Aziz, Faisal
Institute of Public Health, College of Medicine and Health Sciences, United Arab Emirates University, United Arab Emirates

THEMATIC STREAM: BREASTFEEDING (OP32)

OP32
A ‘NEC FREE NICU’ THROUGH BREASTFEEDING QUALITY IMPROVEMENT PROJECT (QIP)
Philip, Roy1; Ismail, Abu1; Quinn, Collette1; Dunworth, Margo1; Hassanoglu, Ailish1;
O’Leary, Margaret1
1University Maternity Hospital Limerick, Ireland;
2Department of Statistics, University of Limerick, Ireland

THEMATIC STREAM: ADOLESCENCE MEDICINE (OP33)

OP33
AN OVERVIEW ON LEBANESE ADOLESCENT LEARNING DIFFICULTIES
Kozak, Sandra1; Gerbala, Bernard1; Ghoreyeb, Zak1; Fadous Khalife, Marie Claude1
1Holy Spirit University of Kaslik (HSUK), Lebanon;
2USJ-UH Hotel Dieu, Beirouth, Lebanon

THEMATIC STREAM: SPORTS MEDICINE (OP34)

OP34
FEASIBILITY AND PRACTICALITY OF THE PAEDIATRIC GAIT, ARMS, LEGS, AND SPINE EXAMINATION IN DETECTING MUSCULOSKELETAL ABNORMALITIES IN MALE EMIRATI ADOLESCENTS
Loney, Tom1; Micallef-Stafrace, Kiril1; Carter, James M.1; Cummings, Kim L.1; Plank, Joel; Weatherall, Lee1; Al Shihhi, Mouza1
1Institute of Public Health, College of Medicine and Health Sciences, United Arab Emirates University, United Arab Emirates;
2Institute for Physical Education & Sport, University of Malta, Malta;
3School of Sport, Exercise and Health Sciences, Loughborough University, UK

THEMATIC STREAM: CHILDREN’S ENVIRONMENTAL HEALTH (OP30)

Hall: Al Safa 3 & 4
08.00-09.30
EIP Special Interest Group: Childhood Obesity in United Arab Emirates
Chair: Syed Mahboob Shah, United Arab Emirates
Co-Chair: Elhadi H. Aburawi, United Arab Emirates
Identify when and how to address culturally sensitive issues with local adolescents.

Identify what to screen for during an adolescent clinic visit.

Learning Objectives

Though cultural differences may exist in how concerns are sometimes voiced, adolescent development in your clinic visit (Megan A. Moreno, Fadia AlBuhairan, Saudi Arabia) Description

Adolescence includes 3 developmental stages: early, middle and late adolescence. These stages influence an adolescent’s biology, level of independence, and cognitive skills. Understanding key issues related to adolescent development can help a paediatrician ask questions and provide guidance using language that is understandable and relevant to that patient.

Learning objectives

• Learn the three stages of adolescence and key issues related to biology, independence and cognitive skills
• Learn how to use this understanding in framing questions to use during the clinical visit
• Consider ways to apply this in clinical practice when working with teens

Screening and comprehensively addressing adolescent health in your clinic- doing what you need to do in a culturally sensitive manner (Fadia AlBuhairan, Saudi Arabia) Description

Though cultural differences may exist in how concerns are sometimes voiced, adolescent development in your clinic visit (Megan A. Moreno, Fadia AlBuhairan, Saudi Arabia) Description

Adolescence includes 3 developmental stages: early, middle and late adolescence. These stages influence an adolescent’s biology, level of independence, and cognitive skills. Understanding key issues related to adolescent development can help a paediatrician ask questions and provide guidance using language that is understandable and relevant to that patient.

Learning objectives

• Identify what to screen for during an adolescent clinic visit
• Learn practical ways on how to specifically address psychosocial issues
• Identify when and how to address culturally sensitive issues with local adolescents

Hall: Emirates Ballroom 1 & 2

09.00-10.00

EIP Up To Date: How to Use Adolescent Development Insights in Your Clinical Practice

Speakers: Megan A. Moreno, USA & Fadia AlBuhairan, Saudi Arabia

Considering adolescent development in your clinic visit (Megan A. Moreno, USA) Description

Adolescence includes 3 developmental stages: early, middle and late adolescence. These stages influence an adolescent’s biology, level of independence, and cognitive skills. Understanding key issues related to adolescent development can help a paediatrician ask questions and provide guidance using language that is understandable and relevant to that patient.

Learning objectives

• Learn the three stages of adolescence and key issues related to biology, independence and cognitive skills
• Learn how to use this understanding in framing questions to use during the clinical visit
• Consider ways to apply this in clinical practice when working with teens

Screening and comprehensively addressing adolescent health in your clinic- doing what you need to do in a culturally sensitive manner (Fadia AlBuhairan, Saudi Arabia) Description

Though cultural differences may exist in how concerns are sometimes voiced, adolescent development in your clinic visit (Megan A. Moreno, USA) Description

Adolescence includes 3 developmental stages: early, middle and late adolescence. These stages influence an adolescent’s biology, level of independence, and cognitive skills. Understanding key issues related to adolescent development can help a paediatrician ask questions and provide guidance using language that is understandable and relevant to that patient.

Learning objectives

• Identify what to screen for during an adolescent clinic visit
• Learn practical ways on how to specifically address psychosocial issues
• Identify when and how to address culturally sensitive issues with local adolescents

Hall: Emirates Ballroom 3

09.00-09.30

EIP Up to Date: Sickle Cell Disease

Speaker: Azzam Alzoebie, United Arab Emirates

Hall: Emirates Ballroom 4

09.00 -10.30

EIP Interactive Case Series: The Expanding Universe of Autoinflammatory Disorder

Speaker: Anders Fasth, Sweden

Description

Familial Mediterranean Fever (FMF) is the archetypical autoinflammatory disorder known for centuries in the Middle East. During the last decades the knowledge about the innate immune system and about autoinflammatory disorders have increased dramatically. New monogenic disorders were clarified such as Cryopyrin Associated Periodic Syndrome (CAPS) and TNF associated Periodic Syndrome (TRAPS), but also recurrent fever syndromes of yet unknown etiology such as the Periodic fever, Paphyritis and Asipheritis (PFAPA) syndrome. Today many other disorders are considered to be autoinflammatory for example Bahcat, systemic JIA and others.
Scientific Programme
Saturday, 6 December 2014

Learning objectives
• Recognition of the problem in the absence of clear history
• Identification of organic causes
• Practical approach at different age groups

Hall: Majlis 3
10.00-14.30
2nd Global Infant Skincare Summit
Chair: Arnold P Oranje, Honorary Professor, Department of Dermatology, Rotterdam, Netherlands

Remarks: Closed session – participation by invitation only

Hall: Majlis 1
10.30-11.00
COFFEE BREAK

10.30-13.30
EIP School: Children’s Environmental Health (PART 2)
Co-ordinators: Katherine M. Shea, USA; Irena Buka, Canada; Hawa-Hamis Senkoro, Gabon

Description
We will explore the basic science and core concepts of children’s special vulnerabilities to environmental hazards. We will emphasize becoming familiar with resources available from the World Health Organization (WHO) that pediatric professionals can use for the benefit of children’s environmental health locally. Didactic, interactive, and participant lead sessions will enhance the learning experience.

Learning objectives
• Participants will understand the special vulnerabilities of children (from preconception through adolescents) to environmental hazards
• Participants will be familiar with the WHO Children’s Environmental Health (CEH) training modules and understand how they can be modified and applied to education of both professional and non-professional groups
• Participants will have knowledge of CEH resources (books/monographs/journals, websites, experts) available through WHO and other professional organizations.

Remarks: Closed session for successful bursary applicants

Organised in collaboration with the World Health Organization

Hall: Al Safa 3 & 4
10.30-14.30
2nd Middle East Leaders’ Forum on Rare Diseases
Co-chairs: Dimitri A. Christakis, MD, MPH, George Adkins Professor of Pediatrics, University of Washington & Director, Center for Child Health, Behavior, and Development, Seattle Children’s Research Institute, USA; Harvey Karp, MD, MPH, George Adkins Professor of Pediatrics, University of Washington & Director, Center for Child Health, Behavior, and Development, Seattle Children’s Research Institute, USA; Katherine M. Shea, USA; Irena Buka, Canada; Hawa-Hamis Senkoro, Gabon

Description
This talk will focus on what really works in three common lower respiratory tract infections: viral bronchiolitis in young infants; community acquired pneumonia in previously well children; and the increasingly common complication of pleural effusion. Recent published evidence will be reviewed and firm recommendations given on what to do .... and what not to do!

Hall: Emirates Ballroom 1 & 2
11.00-11.30
EIP Up To Date: Evidence Based Management of Lower Respiratory Tract Infection
Chair: Tahir Hameed, Saudi Arabia
Speaker: Terence Stephenson, United Kingdom

Description
This talk will focus on what really works in three common lower respiratory tract infections: viral bronchiolitis in young infants; community acquired pneumonia in previously well children; and the increasingly common complication of pleural effusion. Recent published evidence will be reviewed and firm recommendations given on what to do .... and what not to do!

Scientific Programme
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Learning Objectives
• To understand the epidemiology of childhood Lower Respiratory Tract Infection in developed countries
• To appreciate that critical reading of published randomized controlled trials is the best guide to treatment
• To leave the lecture with clear guidance on what to do when you return to your own country and are faced with similar cases

Hall: Emirates Ballroom 3
11.00 -12.00
EIP Up To Date: Rotavirus Disease and Prevention
Speakers: Adam Finn, United Kingdom & Richard Malley, USA

Hall: Emirates Ballroom 4
11.00 -12.00
EIP Up To Date: Taming Toddler Tantrums...and Boosting Patience and Cooperation: 8 Months-5 Years
Speakers: Harvey Karp, USA

Description
Toddler are challenging! Their outbursts cause family stress, dysfunctional parenting and abuse. An innovative approach to toddler communication is offered, utilizing a language style tailored to the young child’s relative immaturity of the left versus right hemisphere. These techniques can help caregivers reduce tantrums and boost toddler patience and cooperation.

Learning objectives
• Explain what is meant by the term the “Little Adult Assumption”
• What happens to left-hemisphere functioning in children and adults during emotional upsets?
• List the three key characteristics of speaking “toddler-ese”

Hall: Emirates Ballroom 5
11.00 -12.30
EIP Interactive Case Series: An Approach to Child with Joint Pain
Speaker: Helen Foster, United Kingdom

Description
This session will describe the differential diagnosis of joint pain in children and through case presentations engage with the audience to demonstrate the approach to clinical assessment, planning investigation and management.

Learning Objectives
At the end of the session, attendees will:
• Be able to describe the differential diagnosis of joint pain in children
• Be able to interpret investigations in the diagnostic work up
• Be able to describe common pitfalls in the use of investigations
• Know about referral indications to rheumatology and orthopaedics

Hall: Emirates Ballroom 6
11.00 -12.30
Workshop on Personal Improvement: How to Take Your Conference Abstract and Turn It into a Paper
Speaker: Megan A. Moreno, USA

Description
After writing an abstract and presenting a poster at a conference, most presenters know their project well and are ready to write a paper. However, many researchers experience barriers in turning their abstracts into papers. This workshop will provide guidance in how and when to write a paper after presenting a scientific abstract at a conference.

Learning Objectives
• Learn key insights regarding HOW and WHEN to write a paper from an abstract presented at a scientific conference
• Learn how to use the work put into writing an abstract and creating a poster to inform your paper writing
• Practice outlining a paper from an abstract
Hall: Emirates Ballroom 1 & 2
11.30-12.00
EiP Up to Date: Extending Influenza Immunisation to Children: Early Lessons from England
Speaker: Joanne Yarwood, United Kingdom

Description
In 2013 influenza immunisation was offered to all two and three year old children, and some children in pilot areas, as a first step to offering LAIV to healthy children. This presentation explains the rationale and provides early feedback about the challenges which must be addressed to enable effective implementation.

Learning Objectives
• To understand the basis for immunising children against flu, and the anticipated benefits of such an approach.
• To understand the elements which need to be in place to implement a successful childhood influenza immunisation programme.
• To understand the challenges that a programme of this size brings and how they can be addressed, focussing on an incremental approach to roll-out.

Hall: Emirates Ballroom 1 & 2
12.00-12.30
EiP Quiz the Expert: Childhood Obesity
Chair: Syed Mahboob Shah, United Arab Emirates
Case Presenters: Lolowa Al Mukhini, United Arab Emirates, Abdel Azim Mabrouk Ali, United Arab Emirates & Anoud Khalfan Al Kendi, United Arab Emirates

Hall: Emirates Ballroom 3
12.00-12.30
EiP Quiz the Expert: Rheumatology
Chair: Athimalaipet V. Ramanan, United Kingdom
Case Presenters: Elsadeg Mohamed Sharif, United Arab Emirates & Khulood Khawaja, United Arab Emirates

Hall: Emirates Ballroom 1 & 2
12.30-13.30
EiP Debate: Meningococcal Vaccines Debate - Immunise Children or Adolescents - Which Is the Best Approach?
Moderator: Dimitri A. Christakis, USA
Speakers: Adam Finn, United Kingdom & Richard Malley, USA

Description
Polysaccharide capsular vaccines against meningococcus have largely been replaced by conjugated and a new generation of protein antigen vaccines are now becoming available. With the move away from targeted risk-groups towards universal usage, different immunisation strategies have emerged, either early in the first decade or in the second decade of life. The merits of these two approaches will be debated. Audience participation through voting and questions to the debaters encouraged.

Learning objectives
• Learn about factors which influence immunisation strategies
• Understand principles of direct and indirect protection
• Contrast opposing views and how they differ from consensus

Hall: Emirates Ballroom 1 & 2
13.30-14.00
EiP 2014 Highlights and Announcement of the Conference Awards Winners
Speakers, Chairpersons and Moderators’ Index

Dima Abo Saleh ..................................................18, 40
Hed, Nutrition Services Department, King Faisal Specialist Hospital & Research Center, Riyadh, Saudi Arabia

Elhadi H. Aburaswi .............................................61
FRCP, FRCPCH, FAACC, PhD, Associate Professor & Consultant Pediatric Cardiologist, Department of Pediatrics, College of Medicine and Health Sciences, UAE University, Al Ain, United Arab Emirates

Mariette Ake .....................................................18, 29
MS, Psychologist, Mafra Hospital, Abu Dhabi, United Arab Emirates

Eman Alattash ...................................................30
Sheikh Khalifa Medical City, Abu Dhabi, United Arab Emirates, United Arab Emirates

Shamsa Alaudel Rahman Al Awar ..........................56
Assistant Professor, Department of Obst/Gyn, CMHS College of Medicine and Health Science, United Arab Emirates

Khoulia Al Boushi ...............................................58
Senior Resident, Sheikh Khalifa Medical City, Abu Dhabi, United Arab Emirates

Fadia AlBuhaian ..................................................19, 22, 31, 62, 63
MD, Vice President, Saudi Society for Adolescent Health; Assistant Professor, Pediatrics & Adolescent Medicine, Department of Pediatrics; Leader, Adolescent Health Research Program, King Abdulaziz International Medical Research Center; Head, Center for Excellence, National Family Safety Program, King Abdulaziz Medical City & King Saud bin Abdulaziz University for Health Sciences, Riyadh, Saudi Arabia

Hasan Al-Dhekri ..................................................30
Department of Pediatric Allergy/Immunology, King Faisal Specialist Hospital and Research Center, Riyadh, Saudi Arabia

Majid Alfaadhel ...................................................21, 50
MD, MHS, SCC-Ped, ABHSC(H), FCCM, Head of Genetics Division, Department of Pediatrics, Assistant Professor, King Saud bin Abdulaziz University for Health Sciences, King Abdulaziz Medical City, Riyadh, Saudi Arabia

Hessa Khalfan Alghazal .......................................19, 24
MBBS; MS(h); MD(h); Director of Maternal and Child Health, Ministry of Health, United Arab Emirates

Nesreen Alhaj .....................................................59
RN, Sheikh Khalifa Medical City, Abu Dhabi, United Arab Emirates, United Arab Emirates

Nadla Al Hashmi ..................................................18, 30
Genetic and Developmental Medicine Clinic, Sultan Qaboos University Hospital, Muscat, Sultanate of Oman

Abdel Azim Mabrouk Ali ....................................66
MD, CABB, Consultant, AHS, SEHA Abu Dhabi, United Arab Emirates

Fatima Al Jaber ...................................................54
Senior Resident, Sheikh Khalifa Medical City, Abu Dhabi, United Arab Emirates

Jamil Al Jebuh .....................................................18, 29, 30
Consultant Pediatric Endocrinologist, Acting Chairman of Pediatrics, Sheikh Khalifa Medical City, Abu Dhabi, United Arab Emirates

Sara Al Jumali .....................................................58
Senior Resident, Sheikh Khalifa Medical City, Abu Dhabi, United Arab Emirates

Nawal Al Kaabi ...................................................20, 51, 54, 57
Division Chief, Infectious Diseases, Medical Affairs, Sheikh Khalifa Medical City, Abu Dhabi, United Arab Emirates

Anoud AlKhalifa Al Kendi .....................................66
MD, Department of Pediatrics, Tawam Hospital, Al Ain, United Arab Emirates

Sultan Al-Khenaizan ...........................................20, 50, 51
MBBS, FRCP, DABO, Assistant Professor, King Saud bin Abdulaziz University; Consultant Dermatologist and Laser Surgeon, Dermatology Division, Department of Medicine, King Abdulaziz Medical City – Ministry of National Guard, Riyadh, Saudi Arabia

Fowzan Sami Alkuwara .....................................18, 40
MD, FAAP, FACC, Professor of Human Genetics, Principal Clinical Scientist/Senior Consultant, Head of the Developmental Genetics Unit, King Faisal Specialist Hospital and Research Center, Riyadh, Saudi Arabia

Ahmad M. Almaj ..................................................18, 19, 20, 29, 31, 55
MD, Consultant, Chief of Child Psychiatry, Sheikh Khalifa Medical City, United Arab Emirates

Saleh Al Mohsen ..................................................30
MD, FAAP, FRCPCH, Asthma Research Chair and Prince Niall Center for Immunology Research; Assistant Professor, Consultant Allergy and Immunology, Department of Paediatrics, College of Medicine, King Saud University, Riyadh, Saudi Arabia

Ayesha Al Muhib ..................................................54
Senior Resident, Sheikh Khalifa Medical City, Abu Dhabi, United Arab Emirates

Lolowa Al Mukhiri .............................................66
MD, CABB, Consultant and Chair, Child Care Program, Al Mwaiji Health Center, AHS, SEHA Abu Dhabi, United Arab Emirates

Fatihya Al Murshed ...............................................20, 44, 51
MD, M.Sc, FRCPCH, FCCM, CIP, Clinical and Biochemical Geneticist, Genetic and Developmental Medicine Clinic, Sultan Qaboos Hospital University, Sultanate of Oman

Fuad Al Mulali ...................................................20, 58
MD, Pediatrician, Biochemical Geneticist (Metabolic), Department of Paediatrics, Prince Sultan Military Medical City, Riyadh, Saudi Arabia

Asma Al Nuaimi ..................................................18, 21, 38, 58, 59
MBBS, FAAP, FRCPCH, FCCP, EMHCA, MSc (Health Economics & Law); Consultant Pediatric Pulmonologist, Zayed Military Hospital, United Arab Emirates

Ali Alrabadi .......................................................20, 50, 51
MD, Consultant Dermatologist, King Abdulaziz Medical City-Jeddah & Assistant Professor, King Saud bin Abdulaziz University for Health Science-Jeddah; Vice President of the Saudi Dermatology Society, Saudi Arabia

Mohammed T. Al Rifai ........................................50
Division of Neurology, Department of Pediatrics, King Abdulaziz Medical City; College of Medicine, King Saud bin Abdulaziz University for Health Sciences, Riyadh, Saudi Arabia

Deema Badr Alsad .............................................63
Pediatric Resident, National Guard Hospital, King Abdulaziz Medical City, Riyadh, Saudi Arabia

Ahmed Al Suwaidi .............................................52
MBBS, FRCP, FAAP, Assistant Professor of Pediatrics, Assistant Dean for Student Affairs and Alumni, Pediatric Infectious Diseases Consultant, UAE University, College of Medicine and Health Sciences, Al Ain, United Arab Emirates

Azzam Alzoubie ..................................................22, 62
Chief Pediatric Hematology & Oncology Division, Sheikh Khalifa Medical City, Abu Dhabi, United Arab Emirates

Jean Michel Borys .............................................37
European Network Director, EPODE International Network, France

Irena Buka ..........................................................23, 19, 39, 64
FRCP, Clinical Professor of Paediatrics, University of Alberta; Director of Children’s Environmental Health Clinic (CHEC), Edmonton, Canada

Philip Castle .......................................................18, 29
PHD, MPH, Executive Director of Global Cancer Initiative (Chatestown, MD), and Executive Director of the Global Coalition against Cervical Cancer, USA

Dimtri A. Christakis .............................................2, 7, 18, 20, 22, 24, 29
MD, MPH, George Adams Professor of Pediatrics, Adjunct Professor of Psychiatry & Adjunct Professor of Health Services, University of Washington; Director, Center for Child Health, Behavior, and Development, Seattle Children’s Research Institute, USA; Chairman of the Excellence in Pediatrics Institute

Frederick A. Connell .................................18, 19, 21, 23, 24, 53, 60
MD, MPH, Professor & Associate Dean, School of Public Health, University of Washington, Seattle, USA

Arthur I. Eidelman ..............................................18, 19, 21, 27, 42, 57
MD, FAAP, FAAM, Professor Pediatrics (Emeritus), Past President, Academy Bayrd Matthews, Prince Editor in Chief, Breastfeeding Medicine; International Editor, Journal of Perinatology, USA

Pamela Ewan .....................................................18, 37, 38, 42
Consultant Allergist, Allergy Department, Cambridge University Hospitals NHS Foundation Trust United Kingdom

Ala Farraj ..........................................................30
MD, PhD, Professor of Pediatric Immunology, Department of Pediatrics, University of Gothenburg & The Queen Silvia Children’s Hospital, Sweden

Adam Flinn .........................................................22, 65, 66
BMBC(Gren), MA(Cantab), PhD(Lond), FRCP, FRCPCH, Professor of Paediatrics, Schools of Clinical Sciences & Cellular & Molecular Medicine, University of Bristol, UK

Helen Foster .....................................................18, 19, 22, 23, 27, 37, 40, 65, 67, 78
Professor Paediatric Rheumatology, Newcastle University, Honorary Consultant Paediatric Rheumatology, Great North Children’s Hospital, Newcastle upon Tyne NHS Foundation Trust, United Kingdom

Tanya Froehlich ..................................................18, 19, 20, 31, 38, 55
MD, MS, FAAP, Associate Professor, University of Cincinnati Department of Pediatrics & Cincinnati Children’s Hospital, USA

Charles P. Gerba ..............................................39, 54, 80
Professor, Dept. of Soil, Water and Environmental Systems, University of Arizona, USA

Tahir Hamed .......................................................64
MD, FRCP, FAAP, Section Head, General Pediatrics, King Abdulaziz University; Adjunct Assistant Professor, Pediatrics, King Saud bin Abdulaziz University for Health Sciences, Saudi Arabia

Harb A. Harf .......................................................18, 28, 30
MD, National Center of Allergy, Asthma & Immunology (NCAAI) Riyadh, Saudi Arabia

Abdulrahman Bin Hassanein .....................................58
Senior Pediatric Resident, Prince Sultan Military Medical City, Riyadh, Saudi Arabia

Salah Eldin. Hussein ............................................18, 41
Socialist Physician, General Pediatrics, Medical Affairs, Sheikh Khalifa Medical City, Abu Dhabi, United Arab Emirates

Nahla Hwalla .......................................................37
Dean of the Faculty of Agricultural & Food Sciences, American University of Beirut, Lebanon

Waliid Kaplan .....................................................18, 29
Consultant Physician & Chief, Division of Pediatric Endocrinology, Tawam Hospital, Al Ain, United Arab Emirates

Harvey Karp .......................................................16, 22, 24, 25, 65
MD, FAAP, Assistant Professor of Pediatrics, University of Southern California School of Medicine, USA
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About Dubai

Dubai is without a doubt a destination of the 21st century and one of the few cities in the world that has undergone such a rapid transformation - from a humble beginning as a pearl-diving centre - to one of the fastest growing cities on earth.

Dubai today has earned itself the reputation of being the ‘gateway between the east and the west’. It is also considered as the dynamic nucleus of the Arabian Gulf region.

Home to just over 2 million people from more than 200 nationalities, Dubai is one of the most cosmopolitan cities in the world. Dubai, while constantly expanding, occupies over 4,000 square kilometres.

With year-round sunshine, intriguing deserts, beautiful beaches, fascinating heritage attractions and a thriving business community, Dubai receives millions of business and leisure visitors each year from around the world.

Dubai is tolerant and cosmopolitan and all visitors are welcome. However, Islam is a way of life in the city, and therefore visitors should adopt a certain level of cultural and religious sensitivity for the duration of their stay.

Language

Arabic is the official and main language, but English is widely spoken in every part of the country.

Time

Dubai is four hours ahead of Greenwich Mean Time (UTC/GMT +4 hours)

Currency

The monetary unit is the Dirham (AED), which is divided into 100 fils. The exchange rate is pegged to the US Dollar at the rate $1 = AED 3.675.

Banks and Shopping Hours

• Government offices: Sun - Thu: 07:30 - 14:30
• Commercial offices: Sun - Thu: 08:00 - 13:00 & 16:00 - 19:30
• Most international companies work from 09:00 - 18:00 with one hour for lunch
• Exchange houses: Sun-Thu: 08:30 - 13:00 & 16:30 - 20:30.
• Shopping malls: Sat-Wed: 10:00 - 22:00 & Thu-Fri: 10:00 - 24:00
• Banks: Sunday - Thursday 08:00-13:00, and on Saturday 08:00-13:00.
  On Thursdays, the start of the weekend, they will close at 12 noon.

Climate

Dubai has a northern hemisphere sub-tropical, arid climate. May to September is summer. Average high daytime temperatures in August are 42 C and average low night temperatures 32 C. October to April are the cooler months. Average high daytime temperatures in January are 23 C and average low night temperatures 12 C. Rain falls on an average of only 7 days per year, usually in the winter months, and the average annual total is 10.7 cms per year.

Clothing

You are advised to dress modestly when in public and women are asked to cover their shoulders and avoid wearing short skirts.

Dialling Code

International country code: + 971

Electricity

Electricity is 220-240v with a frequency of 50 Hertz. British standard plugs are utilized.

Useful Phone Numbers

For callers outside UAE, the country code is +971.

Police ................................................................. 999 (emergency)
                                     ............................................................... 901 (non-emergency)
Ambulance ......................................................... 998 / 999
Fire Department .................................................. 997
Coast Guard ......................................................... 996
Dubai International Airport ......................... +971 4 224 5555
Flights and Emirates services ...................... 600 55 55 55
Thursday, 4 December 2014

Hall: Emirates Ballroom 3
13.30-14.30 Meeting on the Occasion of Excellence in Pediatrics
Breastfeeding Support for Preterm Infants - The Latest Insights on Breastfeeding Physiology
Speakers: Prof. Alan Lucas, United Kingdom & Dr. Mike Woolridge, United Kingdom
Supported by Philips AVENT

Hall: Emirates Ballroom 5
13.30-14.30 Meeting on the Occasion of Excellence in Pediatrics
The Use of Evidence-Based Medicines in Pediatrics
Fighting Rhinosinusitis the Natural Way; Tailored Multi-Target Phytotherapy
Speaker: Prof. Andre Gessner, Germany
Phytotherapy for Lower Respiratory Tract Infection - Is There Any Evidence?
Speaker: Prof. Stefan Zielien, Germany
Phytoengineering: Modern Research in the Development of Evidence-Based Phytopharmaceuticals
Speaker: Prof. Michael A. Pop, Germany

Questions and Answers
Supported by Bionorica SE

Hall: Majlis 1
13.30-14.30 Meeting on the Occasion of Excellence in Pediatrics
Detecting Rare Diseases - You cannot recognize what you do not know
Moderating rare disease experts:
  • Prof. Helen Foster - Paediatric Rheumatology, Institute of Cellular Medicine, Newcastle University, Newcastle upon Tyne and Great North Children’s Hospital, Newcastle upon Tyne, UK
  • Dr. Waseem Fathalla - Mafraq Hospital, Al Mafraq, Abu Dhabi, United Arab Emirates
  • Dr. Charles Marques Lourenço - Neurogenetics Unit, Department of Medical Genetics, University of Sao Paulo, Brazil
  • Prof. Anders Fasth - Dept of Pediatrics, University of Gothenburg, The Queen Silvia Children’s Hospital, Göteborg, Sweden
  • Stefano Bruni, MD - Director Medical Affairs MPS EMEA, Genzyme Europe

Learning objective: Aligned with EiP’s global Rare Disease Initiative, the objective of this 1 hour, open-forum session is:
  • to inform pediatricians on the barriers to early diagnosis, referral, and treatment for children with rare diseases;
  • to stimulate the exchange of experiences on how the differential diagnosis process is currently approached in clinical practice, and
  • to develop possible solutions on how medical education and diagnostic/referral networks could be improved to address this problem, in cooperation with the rare disease experts.

Thursday, 4 December 2014

Meeting on the occasion of Excellence in Pediatrics

Introduction: Current situation - Within the medical community, rare diseases are often thought of as being complicated, highly unlikely, and untractable. However, a delay in diagnosis and treatment for an affected child can result in missed opportunities for intervention, and reduced life expectancy and quality of life. New treatments for rare diseases are being developed each year and early treatment initiation is critical for optimal patient outcomes. Unfortunately, despite the availability of new therapies, earlier disease recognition has not improved much in the last 10 years (LSD Registry data). While newborn and early childhood screenings should prevent diagnostic delays in the future, it may take several years for these programs to be implemented. It is important to ensure that clinicians are alert to the possibility of a rare disease in their patients, even if they are not able to diagnose specific diseases. What strategies and actions can medical communities take now to aid early diagnosis of rare diseases and appropriate referrals by front-line pediatric clinicians?

Breakout table discussions
1. What rare conditions have you come across during your practice?
   • What is the percentage of patients affected by rare conditions that you are currently following in your department/private office?
   • How many patients affected by rare diseases have you suspected and/or diagnosed?
   • Why did you suspect a rare condition in this case?
   • Did you use any differential dx/assessment tools?
   • What action did you take?
   • Did you refer these patients to centers of excellence or specialists (what kind of specializations) or did you directly request specific examinations?

2. What cluster of symptoms would trigger you to suspect an inborn error/rare condition?
   • Did you use any differential dx/assessment tools?
   • Would a validated screening checklist or diagnostic algorithm of “warning” symptoms or symptom constellations be useful?
   • Could electronic-medical-record (EMR) systems be programmed to issue an alert when these warning symptoms are entered?
   • What strategies/actions do you feel are needed to aid early diagnosis of rare genetic disorders (to allow families’ earlier access to genetic counselling and timely treatment, when available)

3. What cluster of symptoms would trigger you to suspect an inborn error/rare condition?
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   • Would a validated screening checklist or diagnostic algorithm of “warning” symptoms or symptom constellations be useful?
   • Could electronic-medical-record (EMR) systems be programmed to issue an alert when these warning symptoms are entered?
   • What strategies/actions do you feel are needed to aid early diagnosis of rare genetic disorders (to allow families’ earlier access to genetic counselling and timely treatment, when available)

4. What specific strategies could be taken to ensure that rare disease curriculum is taught (mandatory) in medical schools and in Continued Professional Development (CPD) of Health Professionals?
   • Do you think that rare disease curriculum should be mandatory in medical schools and in CPD of Health Professionals?
   • In your opinion, what are the skills and behavior needed for early detection of rare diseases?
   • Can you suggest any themes or approaches to make rare disease learning more appealing/attractive for clinicians?
5. What specific strategies could be taken to ensure that rare disease curriculum is taught (mandatory) in medical schools and in Continued Professional Development (CPD) of Health Professionals?
   • Do you think that rare disease curriculum should be mandatory in medical schools and in CPD of Health Professionals?
   • In your opinion, what are the skills and behavior needed for early detection of rare diseases?
   • Does incidence and treatability of disease groups play a role in prioritizing this education?
   • Can you suggest any themes or approaches to make rare disease learning more appealing/attractive for clinicians?

14:10 – 14:30 Group feedback
• Summary of each table discussion and action items
   Supported by Genzyme

Hall: Emirates Ballroom 3

17.30-18.30 Meeting on the Occasion of Excellence in Pediatrics

Niemann-Pick Type C Disease

Updates on Niemann-Pick Type C Disease Diagnosis and Management
Speaker: Jackie Imrie, United Kingdom

Management of Niemann-Pick Type C Disease in the Middle East Region
Speaker: Prof. Moeen Al-Sayed, Saudi Arabia

The Patients’ Perspective on the Niemann-Pick Type C Disease
Speaker: Toni Mathieson, United Kingdom

Supported by Actelion

Friday, 5 December 2014

Hall: Emirates Ballroom 4

13.00-14.00 Meeting on the occasion of Excellence in Pediatrics

Home Hygiene - Practical Advice for Pediatricians to Provide to New Parents
Speakers:
Prof. Charles P. Gerba, Dept. of Soil, Water and Environmental Science, University of Arizona, USA
Dr Andrew Carr, Principal Scientist, Clinical Research, P&G Baby Care

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Partners, Sponsors, Exhibitors & Contributors

Excellence in Pediatrics would like to take this opportunity to express its sincere gratitude to all our 2014 event partners, sponsors, exhibitors and contributors for their continuing support, without which it would have been impossible to stage such a successful meeting.

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**Pampers**
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**Amsterdam University College**

**Elsevier**

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Exhibition Floor Plan

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Biologix-Shire ....................................................................................................... 16 & 17
BioMarin ................................................................................................................ 13
Elsevier .................................................................................................................. 6 & 7
Genzyme ................................................................................................................ 8 & 11
Pampers & Safeguard ......................................................................................... 12 & 15
Pampers- The Infant Skin Care Initiative
For more than 50 years, parents have trusted Pampers to care for their babies, and this is a responsibility we take to heart. For more than half a century, Pampers has been caring for the happy, healthy development of the world’s babies and, in turn, has grown to become P&G’s biggest brand, with annual net sales of more than $10 billion. Every day Pampers serves more than 25 million babies in more than 100 countries around the world, making Pampers the #1 selling diaper brand of worldwide. Pampers was inspired by babies. In 1956, Vic Mills, a P&G researcher, was inspired by his desire to create a better diaper for his new born grandson, and his work led to the creation of the brand. Pampers takes great care in developing products that benefit both baby and mom, and we are committed to making a difference in babies’ lives. Thanks to our research, innovation, and quality, parents can count on Pampers’ products to help their babies get the most out of Love, Sleep & Play. Pampers continues to be one of P&G’s fastest growing brands, helping to improve everyday lives for babies and the parents who care for them with a complete range of diapers, wipes and training pants designed to provide protection and comfort for every stage of baby’s development.

About Procter & Gamble
P&G serves nearly five billion people around the world with its brands. The Company has one of the strongest portfolios of trusted, quality, leadership brands, including Always®, Ambi Pur®, Ambi Pur®, Arial®, Bounty®, Charmin®, Crest®, Dawn®, Downy®, Duracell®, Fairy®, Febreze®, Gain®, Gillette®, Head & Shoulders®, Lenor®, Olay®, Oral-B®, Pampers®, Pantene®, Secret®, Tide®, Vicks®. Our P&G community includes operations in approximately 70 countries worldwide. Please visit http://www.pg.com for the latest news and in-depth information about P&G and its brands.

BOOTH: 8 & 11

Sponsors & Exhibitors Catalogue

Bionorica
Bionorica SE is one of the leading companies in the area of phytopharmaceuticals and is marketing products with proven efficacy, safety and quality in 50 countries worldwide. The product range focuses mainly on diseases of the respiratory tract, urinary tract, gynaecological disorders and on medications for the treatment of pain. Bionorica’s know-how in phyotherapy has grown in 80 years and the company’s development of rational herbal medical drugs can be compared to the standards of chemically synthesised drugs. One main focus of our work is the research, development and marketing of plant-based medicines for the treatment of children with respiratory and urinary tract infections. The products of Bionorica are prescribed and recommended by physicians and are sold exclusively in pharmacies. Bionorica is committed to its “phytoneering principle”. Phytoneering stands for deciphering the active principles in botanics (PHYTO) using innovative technologies (engineERING) to research, develop and manufacture most effective phytopharmaceuticals. The entire complex process from the development of appropriate seed material to the production of the final pharmaceutical product has to be scientifically standardized and thoroughly controlled. These essential steps include appropriate plant harvesting and drying methods, an optimized extraction process, the development of effective galenics and an innovative packaging technology for the final products. In addition comprehensive preclinical and clinical studies have to be performed to assure efficacy, safety and quality of plant-based medicines for the treatment and prevention of diseases.
Bionorica has established an impressive network of scientists working in about 450 renowned universities, institutions and organizations worldwide. With products such as Sinupret®, the most sold plant-based cold and cough remedy in Germany, Bionorica generated a net turnover of 223,9 million Euro in 2013.

BOOTH: 12 & 15

About The Coca-Cola Company
The Coca-Cola Company (NYSE: KO) is the world’s largest beverage company, refreshing consumers with more than 500 sparkling and still brands. Led by Coca-Cola, one of the world’s most valuable and recognizable brands, our Company’s portfolio features 17 billion-dollar brands including Diet Coke, Fairy, Sprite, Coca-Cola Zero, vitaminwater, Powerade, Minute Maid, Simply, Georgia and Del Valle. Globally, we are the No. 1 provider of sparkling beverages, ready-to-drink coffees, and juices and juice drinks. Through the world’s largest beverage distribution system, consumers in more than 200 countries enjoy our beverages at a rate of 1.9 billion servings a day. With an enduring commitment to building sustainable communities, our Company is focused on initiatives that reduce our environmental footprint, support active, healthy living, create a safe, inclusive work environment for our associates, and enhance the economic development of the communities where we operate. Together with our bottling partners, we rank among the world’s top 10 private employers with more than 700,000 system associates. For more information, visit Coca-Cola Journey at www.coca-colacompany.com; follow us on Twitter at twitter.com/CocaColaCo, visit our blog, Coca-Cola Unlocked, at www.coca-colablog.com or find us on LinkedIn at www.linkedin.com/company/the-coca-cola-company.
Actelion- The Rare Diseases Initiative
Actelion Ltd is a leading biopharmaceutical company focused on the discovery, development and commercialization of innovative drugs for diseases with significant unmet medical needs. Actelion is a leader in the field of pulmonary arterial hypertension (PAH). Our portfolio of PAH treatments covers the spectrum of disease, from WHO Functional Class (FC) I through to FC IV, with oral, inhaled and intravenous medications. Although not available in all countries, Actelion has treatments approved by health authorities for a number of specialist diseases including Type I Gaucher disease, Niemann-Pick Type C disease, Digital Ulcers in patients suffering from systemic sclerosis, and mycosis fungoides in patients with cutaneous T-cell lymphoma. Founded in late 1997, with over 2,400 dedicated professionals covering all key markets around the world including Europe, the US, Japan, China, Russia and Mexico, Actelion has its corporate headquarters in Allschwil / Basel, Switzerland.

Novartis- The Menigitis Initiative
The only thing better than finding a cure for a disease is preventing illness in the first place. Novartis Vaccines—the world’s fifth largest manufacturer of vaccines and the second largest producer of influenza vaccines—is committed to the fulfillment of this highest of medical ideals. The Novartis Vaccines division is a leader in providing products to fight more than 20 vaccine-preventable viral and bacterial diseases. By our very function, we play a key role in the Novartis core mission: keeping healthy people healthy by alleviating suffering and enhancing quality of life. At Novartis Vaccines, caring begins with prevention. At Novartis Vaccines, we feel privileged to be working in a field where we can truly make a difference in protecting the lives of so many people from infection and disease. We are acutely aware of the responsibility that comes with this privilege. Every second, an estimated 25 people globally receive a vaccine created by Novartis, helping to protect them against devastating diseases. A solid emphasis on research and a never-ending commitment to preventing disease have been the driving forces at Novartis Vaccines and our heritage companies. Established in April 2006, following the Novartis acquisition of Chiron, our history includes such legends of twentieth-century vaccinology as Emil von Behring, who won the 1901 Nobel Prize for his development of serum therapies against diphtheria and tetanus, and founded the German vaccines firm Behringwerke; and Achille Sclavo, the Italian scientist who developed anthrax serum and established the eponymous vaccine manufacturer that long led the field in Italy. Sclavo amassed a rich inventory of accomplishments in the sphere of global health, not least his participation in the effort to eradicate smallpox. Today, Novartis Vaccines has a strong global presence, most notably in Europe, with its centers of excellence in Germany, Italy and the UK—where we are among the leading suppliers of several crucial vaccines. Novartis Vaccines is also expanding in the US, building a large influenza cell culture plant in Holly Springs, North Carolina, and having established its global headquarters and a virology research center in Cambridge, Massachusetts, to mine the high concentration of scientific and industry expertise in the area. The century-old culture of innovation seeded by Sclavo and von Behring infuses everything we do at Novartis Vaccines, as does our mission to alleviate suffering through the prevention of disease.

Al Jalila Children’s Specialty Hospital
BACKGROUND
As a testament to the love for children HH Sheikh Mohammed Bin Rashid Al Maktoum Vice President, Prime Minister of the United Arab Emirates, Ruler of Dubai, on 2 December 2008, which coincided with the UAE National Day and the birthday of HH Sheikha Al Jalila Bint Mohamed Bin Rashid Al Maktoum announced the establishment of a dedicated 200 bed Children’s Hospital as a gift to the children of the UAE, and beyond. Al Jalila Children’s Specialty Hospital shall have the highest international standards and shall be the fifth hospital in the portfolio of health institutions operated by the Dubai Health Authority. Al Jalila Children’s will be the first tertiary care hospital in the UAE to focus on and specialise exclusively in the treatment of children, setting a new standard in healthcare excellence, fostering clinical innovations, ground-breaking technologies and cutting-edge research facilities. The hospital’s services will include specialty inpatient and outpatient care comprising an extensive portfolio of paediatric specialties and sub-specialties, rehabilitative care, state-of-the-art clinical support services and centres of excellence, including: a Heart Centre, Kidney Centre, Critical Care Centre, Neurosciences Centre, Mental Health and a Cancer & Blood Disorder Centre. In 2009, the Al Jalila Children’s Specialty Hospital won the Future Health Projects award at the prestigious World Architecture Festival which took place in Barcelona, Spain - 215 entries were submitted from across the globe. In 2010, the Al Jalila Hospital won the Best Sustainable Hospital Project award at the Hospital Build conference. Al Jalila Children’s is positioned to become one of the leading children’s specialty hospitals in the world.
VISION - MISSION - VALUES
Our Vision Healthy, Happy and Safe Community
Our Mission To provide unrivalled excellence in paediatric healthcare, research and education in the UAE, and beyond
Our Values Excellence + Dedication + Innovation + Transparency + Caring + Quality

About Turnkey Project Management
The Turnkey Projects Department at Emitac Healthcare Solutions (EHS) plays a significant role in the growth of EHS reputation in the health care industry. Our Projects Unit has been appointed by Dubai Healthcare City as one of the Design Consultants for Dubai, and is supported by GENESIS Planning, a US based leader in medical equipment planning and architectural design services, enabling caregivers who are looking for a one-stop-solution for all their medical needs. With a core competency in handling Turnkey operations, this business unit also offers end-to-end solutions in Medical Equipment Planning, Architectural Design Planning, Procurement and Project Management, Turnkey Hospital Furnishing Solutions andROLA solutions and Consultancy Services. Over the years, our Projects Unit has executed several large, full spectrum healthcare assignments for public and private sectors, such as Ministry of Public Works, Ministry of Health and Dubai Health Authority, and has set up a consistent track-record in deploying full-fledged healthcare turnkey operations in the region. EHS is also appointed by Dubai Healthcare City as one of the Design Consultants for the region. Our Projects department is led by a committed team of professionals, consisting of PMP-certified project managers, qualified architects/designers and medical equipment planners. This business unit takes full responsibility of the entire project cycle, right from Analysis, Estimating, Specifications and Final Tender Management, up to the Project Handover.

With more than 36 years of experience in the Industry, our integrated team of professionals have deployed several Clinical and IT Solutions in a number of leading government, semi government, military and private hospitals in the MENA region. With our extensive market knowledge and well established partnerships with some of the world’s leading healthcare and technology providers, we continue delivering the highest standards of quality care. Through our unique combination of workforce empowerment and labor force optimization, we offer reliable and cost effective solutions to our customers to achieve sustainable results.

Essentially, our portfolio in healthcare solutions encompasses:

- Patient Handling & Critical Care Solutions
- Healthcare Information & Technology
- Anesthesia & GIS Solutions
- Clinical & Laboratory Solutions
- Hospital & Patient Room Furniture Solutions
- Technical Support Services
- Endoscopy & Imaging Solutions
- Healthcare Equipment Solutions
- Turnkey Projects Dubai
- Healthcare Solutions
- Telecare Solutions
- Two & Measurement Solutions

About Emitac Healthcare Solutions
Emitac Healthcare Solutions offers a vast array of innovative solutions and services to its diverse clientele to address the dynamic and complex requirements of the healthcare industry with the help of strategic and mutually productive partnerships with the finest brands worldwide.
BioMarin develops and commercialises innovative biopharmaceuticals for serious diseases and medical conditions. The company aims to develop first-in-class or best-in-class therapeutics to make a large, meaningful impact in small patient populations. BioMarin provides therapies for patients with rare genetic diseases.

With five products on the market and a fully-integrated multinational organisation in place, BioMarin is providing innovative therapeutics to patients with serious unmet medical needs. We utilise innovative product development strategies to maximise the speed of development and quickly bring those therapies to patients. BioMarin is committed to serving the needs of patients, families and physicians by providing rapid access to therapeutic treatment, disease education and support services.

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