



# BERITA MPA NEWSLETTER

THE MALAYSIAN PAEDIATRIC ASSOCIATION

AUG 2012

FOR MEMBERS ONLY

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The **Berita MPA** is published for members to keep them informed of the activities of the Association and to keep up with developments in paediatrics and child health.

The views & opinions in all the articles are entirely those of the authors unless otherwise specified.

We invite articles and feedback from readers – Editor <editor.bmpa@gmail.com>



This is the last issue of BMPA before the 14<sup>th</sup> APCP and 4<sup>th</sup> APCPN on 8-12 September. We thought we'd let you know what to expect and plan what to do in and around Kuching.



### Attractions in Kuching City

Kuching **Waterfront** has to be the most visited place in town as it is the number one place to shop for souvenirs, handicraft and also to enjoy the beautiful views of the Sarawak River or simply dine at one of the restaurants or cafes along this place which is also known as the Kuching Esplanade. Opposite the waterfront is **Main Bazaar**, the oldest street in the city since 1864, you can find almost every ethnic handicraft at the shops here along Jalan Tunku Abdul Rahman.

The waterfront stretches from near **India Street** which is designed as a pedestrian walkway, where you will find a variety of shophouses trading

colorful textiles, clothing, crockery and other essentials in a manner that has not changed much in the past decade from the west to the east end.

Kuching's **Chinatown** is small and surprisingly serene; a decorated archway and many traditional temples, small bazaars, markets and quaint streets packed with shops and Chinese restaurants, all within an easy stroll.

The **New Sarawak State Legislative Assembly Building (DUN)** is the current state legislative complex of Sarawak. It is the meeting place where state assemblymen from all over Sarawak will meet and preside over debates and passing of laws.

**Fort Margherita**, constructed in 1879 by Charles Brooke was named after his beloved wife Rane Margherita. It guards the river against pirates. Today, it houses a Police Museum with fascinating exhibits of Brooke military weapons captured during the communist insurgency, and the famous "laughing skulls".

The **Square Tower** on the waterfront side was built as a detention camp for prisoners and was a fortress in 1879.

The **Courthouse** is one of the most attractive buildings in Kuching and was built in 1874. It was the scene of many historic events and sittings of

*continued on page 3...*

# Celebrating Children Worldwide

Dear friends and colleagues,

Hello again! I hope that everybody is in the best of health and working towards a better future for our kids. In this issue I would like to remind everyone about some important dates in the medical world – especially those involving children. This is to give us time to prepare, plan activities and celebrate these auspicious dates with children in our areas.

Firstly, the most celebrated day for children worldwide is Children's Day. It is a day to honour children everywhere and celebrated around the world. This celebration began in December 1954, when the United Nations recommended through Resolution 836 (IX) that every country should introduce a Children's Day to be devoted to fraternity and to comprehension among children of the world, and which encourages activities promoting the well-being of children throughout the world. This was originally known as Children's Day.

Then on 20th November 1989, almost all of the states taking part in the UN ratified the International Convention for Children's Rights with the exception of the United-States and Somalia, which have not ratified this convention. From that day onwards, 20th November was designated as Children's Day. However, throughout the historic events taking place in 1959 and 1989, this Children's Day is also known as Children's Rights Day or the International Children's Rights Day, and UNICEF was given the responsibility to manage the celebration. The purpose of the celebration is to create awareness of the responsibilities of all members of society especially parents, private and public agencies towards protecting rights and the future of children as well as to enable members of the public to appreciate the need to uphold the rights and dignity of children in accordance with the rights as accorded to them by the Convention on the Rights of

the Child. Now over 150 countries in the world celebrate World Children's Day.

The United Nations have considered that they "would not be able to fulfil their obligations regarding the future generations without intensifying their efforts in favour of children in the world, who are future citizens, and that a worldwide celebration of this Children's Day would contribute to human solidarity and to international cooperation".

Each year, November 20th reminds us that humanity must give children the best it can provide. This day reminds us of the necessity of acting in favour of the well-being of children in the whole wide world.

## Malaysia's Story

In Malaysia, World Children's Day was first celebrated in 1959. Children's Day is celebrated on the last Saturday of October annually. Many programmes have been drawn up each year at national and state levels to celebrate the day including giving out awards to outstanding children. It is interesting to note that from 2011, Taiwan has made Children's Day a public holiday, a policy that according to their Premier is aimed at highlighting the importance the government attaches to children. Children's Day is often celebrated on other days as well. International Day for Protection of Children, observed in many countries as Children's Day on June 1 since 1950, is said to have been established by the Women's International Democratic Federation on its November 1949 congress in Paris.

The Children's Day (or Children's Rights Day) is celebrated every 20th of November; this day marks the anniversary of the International Convention for Children's rights.

Another interesting celebration is International Children's Day of Broadcasting (ICDB). Created by UNICEF, ICDB is anchored on the



Convention on the Rights of the Child (CRC) which says that all children have the right, amongst others to: 1) participate in decisions affecting their lives 2) have their own view and opinions, 3) express themselves freely without fear, 4) have access to information, including through the media and 5) their own privacy and to be protected from harmful treatment through the media. I am sure you can recall the times when children were given the opportunity to be 'television personalities' and host programmes on the broadcasting day.

It is my fervent hope that from this year onwards, we will be able to play a part in the celebrations of children on the days that have been specifically designated for them.

## Other Important Days

Other notable dates that we opt to keep track of are as follows:

**World Cancer Day**  
4 February 2012

**International Day of Zero Tolerance to Female Genital Mutilation**  
6 February 2012

**International Women's Day**  
8 March 2012

**World Water Day**  
22 March 2012

**World TB Day**  
24 March 2012

**World Health Day**  
7 April 2012

**World Malaria Day**  
25 April 2012

**World Immunization Week 2012**  
21–28 April 2012

**World No Tobacco Day**  
31 May 2012

**World Blood Donor Day**  
14 June 2012

**World Hepatitis Day**  
28 July 2012

... from page 1

the state legislature. The Dewan Undangan Negeri, was held there between 1878 and 1973. The **Brooke Memorial** is just in front the Court House and opposite the waterfront. The 6 meter high granite obelisk was commissioned in 1924 to honor Rajah Charles Brooke. Behind the memorial is the colonial baroque Clock Tower added in 1883.



**Sarawak state museum** is the oldest museum in Borneo. It was established in 1888 and opened in 1891. This building includes the **Ethnology Museum** which showcases Sarawak tribal life and even has human skulls that once hung in traditional longhouses. The **art museum** contains both traditional and modern works from local artists and sharing space with the **Natural Science Museum** and the **Sarawak Islamic Museum**, and consists of 7 galleries set around a central courtyard garden, each with a different theme. One of the interesting artefacts shown here is a replica of the sword used by Prophet Muhammad.

**Kuching Civic Centre** is the highly

visible building with the umbrella-shaped roof. A major landmark in Kuching, it was officially opened on 1 August 1988 following the proclamation of Kuching as a city.

The **Pavilion** was built in 1909 and its design is reminiscent of buildings in the Southern states of America, a mixture of late English renaissance and colonial architecture. It served as a General Hospital until 1947. The **Textile and Costume Museum** is situated in the Pavilion, yet another historical building in its own right, opposite of the **General Post Office**, which was built in 1931. This building stands majestically with its imposing neo-classical style and impressive Corinthian columns.

**Kuching Sunday Market** in Satok is worth browsing through. It has a profusion of goods from handicraft, flowers, local snacks to traditional delicacies. The bustling atmosphere and colourful cornucopia of things makes a trip here enjoyable.

**Attractions Nearby Kuching**  
**Semenggoh Wildlife** is located 22km from Kuching. This is definitely one of the places not to be missed and undoubtedly one of the best attractions in the Kuching area. It offers the opportunity of getting close to some highly mischievous, semi-wild Orang Utan. They are set free in a 740-hectare forest reserve. Here, the Orang Utans are being nurtured to readapt themselves to the jungle. At the centre, you get the chance to

experience standing close to Orang Utans in their natural habitat.



**Sarawak Cultural Village** is located at Damai Santubong, 35km from Kuching City. This is a well-built and well-maintained Sarawak house model that showcases the diverse lifestyles of the state's ethnic groups such as the Ibans, Bidayuhs, Orang Ulu and Melanaus.

**Bako National Park** located 38km from Kuching City is a unique place where nature is combined with spectacular landscapes of steep coastline cliffs, eroded rock formations, a natural park with wildlife, a thriving mangrove swamp and abundant flora and fauna. Photographers or wildlife and nature enthusiasts will find this is a rare place of distinct vegetation - open shrub land and hardy flora at the plateau of the hill range changing to lush and tall rainforest trees and plants and lowland dipterocarp forest on the slopes, casuarina and mangrove trees along the coast. ♣

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... from page 2

**World Breastfeeding Week**  
1-7 August 2012

**World Humanitarian Day**  
19 August 2012

**World Suicide Prevention Day**  
10 September 2012

**World Rabies Day**  
28 September 2012

**World Heart Day**  
29 September 2012

**World Mental Health Day**  
10 October 2012

**World Sight Day**  
13 October 2012

**World Pneumonia Day**  
12 November 2012

**World Diabetes Day**  
14 November 2012

**World Chronic Obstructive  
Pulmonary Disease Day**  
16 November 2012

**World AIDS Day**  
1 December 2012

**International Day of Persons with  
Disabilities**  
3 December 2012

**Human Rights Day**  
10 December 2012

I would also like to take this opportunity to congratulate Dato' Dr Hussain Imam Bin Muhammad Ismail, our Chief Paediatrician on his recent conferment of the DSPN by the Penang State. And last but not least, I would like to wish all Muslim colleagues 'Selamat Berpuasa' and 'Selamat Hari Raya Aidil Fitri'. See all of you at APCP in Kuching in September! ♣

**Noor Khatijah Nurani**  
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# Introduction to Paediatric Palliative Care

**Date:** 18th February 2012 (8am – 5pm)  
**Organisers:** Malaysian Paediatric Association and Hospice Malaysia  
**Secretariat and sponsors of seminar:**  
**Malaysian Paediatric Association**  
**Venue:** Hospice Malaysia (2, Jalan 4/96, Off Jalan Sekuci, Taman Sri Bahtera, Jalan Cheras, 56100 Kuala Lumpur)

#### Speakers and facilitators (5):

1. **Datuk Dr Kuan Geok Lan (Hospital Malacca),**
2. **Dr Loh Ee Chin (UMMC),**
3. **Dr Felicia Chang (Hospice Malaysia),**
4. **Dr Tan Ru Wei (Hospital Malacca),**
5. **Dr Chong Lee Ai (Hospice Malaysia)**

#### Participants (90):

**32 Doctors, 54 nurses, 2 pharmacist, 2 (National Cancer Society)**

## PROGRAMME

Programme included definition and clarification of paediatric palliative care, its development and service provision in Malaysia, communication skills required when dealing with children and their families, pain symptom management, end of life difficulties and bereavement support. Challenges faced when providing palliative care in Malaysia were highlighted with case presentations by Dr Felicia Chang and Dr Tan Ru Wei. Case-based group discussions used for 'breaking bad news', 'bereavement' and 'end of life' sessions. Videos were also used to illustrate and facilitate content delivery.

The aim of the programme was to create awareness and understanding and prepare clinicians and healthcare workers to advocate for improved paediatric palliative care and bereavement programmes.

## SURVEY OF PARTICIPANTS (66)

Paediatricians (10), Medical officers (13), Nurses (37), Others (6)

### A) Provision of palliative care services:

- 71% attends to <10 children with palliative care needs/year
- 23% attends to 10-50 children with palliative care needs /year
- 6% attends to >50 children with palliative care needs /year

### B) Care for dying child

- 23% personally cared for >5 /year
- 63% personally cared for < 5 /year
- 14% never cared for dying children

### C) Availability of Morphine:

- 83% have access to Aqueous Morphine (except Ampang Puteri Hospital)

### D) Understanding of Paeds Palliative Care (PPC):

- 79% thinks PPC is associated with dying
- 75% are comfortable to provide PPC
- 41% are confident to provide PPC

## E) Doctors' feedback (23 responses )

Hospitals	PC in hospital	Paeds PC service?	Home PC?	Bereavement service
Hospital Kangar, Perlis	No	No	Yes Health nurse	No
Hospital SultanahBahiyah, Kedah	No	No	No	No
HUSM, Kelantan	No	No	No	Yes/No
Hospital Pasir Mas, Kelantan	No	No	Yes Nurse	Yes
Hospital Kuala Terenganu	No	No	No	No
Hospital Taiping, Perak	Yes	Yes	Yes	Yes
Hospital Melaka, Melaka	Yes	Yes	Yes/No	Yes
Paeds Institute, HKL	No	No	Yes/No Hospis Malaysia	Yes/No
PPUM, KL	Yes	Yes	Yes/No	No
Hospital Selayang, Selangor	Yes	No	No	Yes/No
Prince Court Medical Centre, KL	Yes	No	Yes Community	Yes
Ampang Puteri Specialist Hospital	No	No	No	No
SDMC, Subang	Yes/No	No	Yes/No	Yes/No
Hospital BatuPahat, Johor	Yes	Yes	Yes/No Nurses	Yes/No
Hospital Muar, Johor	No	No	No	Yes
Hospital Umum Sarawak , Kuching	Yes	No	Yes S'wak Child Ca Soc	Yes

## EVALUATION OF SEMINAR (48 RESPONSES)

100% felt learning needs were addressed

92% interested in another PPC seminar

90% seminar would benefit other colleagues

### Further topics participants might be interested in:

- How to deal with patients' needs (acceptance that they are dying, spiritual aspects, emotional needs, coping with death, patient's role in decision making, care of patient with CVL)
- Suffering and hope
- More details in managing pain and other symptoms, communications, role play
- Setting up PPC in the district, detail role of PPC unit
- Seminars with caregivers and patients
- Role of multidisciplinary members
- More specialty specific (neurology, oncology, renal on dialysis etc)
- Financial aid

### Survey from 27 Doctors (Dr Kuan's questionnaire)

52% 'beginner' in communicating with dying paediatric patients

42% somewhat experienced in communicating with dying paediatric patients' families

55% 'beginner' in coordinating care of dying paediatric patients

48% 'beginner' in pain management

42% 'beginner' in discussing transitioning from curative treatment to palliative care

40% somewhat experienced in discussion DNR

59% 'beginner' to act as mentor or role model to younger colleagues or trainees on above topics

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# 15<sup>th</sup> International Congress on Infectious Diseases (ICID)

June 13-16, 2012, Bangkok



The opening ceremony showcased a drum performance as well as a medley of traditional dances from all the provinces of Thailand. Not a fan of drums, I was pleasantly surprised by the performers as they danced and jumped while beating in perfect rhythm. As for the dancers, their grace and beauty simply took my breath away.

The congress touched on both old and new diseases. Diseases such as polio, though virtually eradicated in most parts of the world remain a problem in a few countries such as Afghanistan. Dengue, once a disease confined to the tropics, can now be found all over the world, thanks to airline travel. Yet we are still unable to eradicate or contain the disease. Vaccines against dengue are currently in the pipeline with promising results. Studies involving the administration of vaccines have found that giving the vaccine to children at 2 years of age was associated with a drop in cases. This can be further improved by giving catch-up immunization to those aged between 3 -14 years. Fogging exercises have been found to be an ineffective way of curbing the mosquito population. In addition to previous infections, age and host genetics have also been implicated in determining the severity of dengue infection.

"All work and no play makes Jack a dull boy..." and I was certainly not going to let that happen to me. As it turned out, the great Thailand sale started a couple of days after we arrived. The convention centre's strategic location allowed me to experience the sales. Without going too much into details, let me just say that I did my part in maintaining the health of the Thai economy!

A trip to Bangkok isn't complete without a visit to the night markets. We visited Patpong night market. It was my first visit and unlike Chatuchak weekend market or Suanloom night market, this place had a little more than just stalls selling souvenir t-shirts and wares. Let us just say that it was an eye opener. Another item on the must do list is a Thai massage. The one we visited was in Central World Shopping Mall. I was pleasantly surprised that it only cost 300 bahts (±RM30) per person for an hour's massage. My regular massage centre in PJ charges close to RM70 for Thai massage. It was refreshing and an apt ending to an enjoyable stay.

The four days came to an end pretty quickly and I was soon flying back to KL, my mind filled with new found knowledge, though not all were academic. Certain things can't be learned from textbooks. Now where have I heard that before?

My heart still races over the things I learned, in particular, in anticipation of the dengue vaccine, which may, in years to come, see a decline in the number of dengue fatalities and morbidities. ☐

**"One night in Bangkok and the world's your oyster..."**, well imagine what 4 nights in Bangkok will do to you. The recent ICID was held in Bangkok, and afforded me a glimpse of the answer.

The congress venue, the Centara Convention Centre, was connected to both the hotel, Centara Grand Hotel, as well as the Central World shopping centre. Its strategic location, however, meant that one had to walk through the convention centre from the hotel in order to reach the shopping mall, and that was enough for my conscience to remind me that I was there for a conference and not for shopping.

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# Raising The Bar On Maternal & Infant Care

Mi-CARE Nurse Training Programme: Another Feather in MPA's Cap!



1. Dr Krishna Kumar presenting a module at a Mi-CARE workshop.
2. Datuk Dr Zulkilfi Ismail delivering the Closing Remarks at one of the Mi-CARE workshops.

3. Datuk Dr Zulkilfi Ismail presenting certificates at one of the Mi-CARE workshops.

4. Dr Kok Chin Leong (left) and Dr Yong Junina (right) presenting various modules at Mi-CARE workshops.

In February this year, MPA collaborated with the nation's three top Professional Bodies in the maternal & infant care fraternity, in a focused initiative to help make a positive difference to pregnancy and infant care, by strengthening practical training and knowledge of nursing staff & midwives in the O&G as well as paediatric centres, nationwide.

Besides MPA, this Experts-based initiative, "Mi-CARE" (Maternal and Infant-CARE), is supported by key Experts & Professionals from the Obstetrical and Gynaecological Society of Malaysia (OGSM), Nutrition Society of Malaysia (NSM) and National Midwifery Society of Malaysia (NMSM)).

With the objective of 'Empowering Nurses to Empower Mothers', the Mi-CARE Programme comprises of a series of two-day Nurses' Training Workshops, featuring a holistic body of knowledge on matters pertinent to maternal and infant health. Mothers require good pregnancy care which results from constructive interaction with healthcare providers and positive lifestyle measures that she takes herself.

The contents for these informative and interactive training workshops are developed and delivered entirely by medical and healthcare professionals in obstetrics and gynaecology, diet and nutrition, physiotherapy, paediatrics and nurse education.

Mi-CARE provides the opportunity for these nurses to engage us and together we learn how to deal with mothers and infants the appropriate way. As Dr.

Krishna Kumar, Chairman of Mi-CARE states, "based on the positive feedback we have received from the participants, we have indeed achieved our intended objectives by imparting relevant information more effectively and re-inforce important key messages such as breast-feeding, vaccinations, pre and post-natal nutrition, family planning and maternal mental health to these healthcare professionals."

Each nurse undergoing the training will also be given a reference manual and various counselling aids, providing more in-depth information on common maternal issues and problems.

"Mi-CARE reflects the critical role of nurses and birth attendants in our healthcare system. A knowledgeable, highly-skilled, and well-equipped nursing workforce is often more crucial than a medical qualification."

As we begin the countdown to achieving the fourth and fifth United Nations Millennium Development Goal by the year 2015 (reduce infant and maternal mortality rates in Malaysia), task-shifting to midlevel health-care providers and the upgrading of their skills to provide safer care in pregnancy and reproductive health is in fact one of the key agenda of the nation.

We all hope that this initiative will continue to achieve astounding success and we look forward to working with paediatricians who are interested. ☑

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# 30<sup>th</sup> Annual Meeting of ESPID

May 8-12, 2012, Thessaloniki, Greece



Part of the Malaysian delegate minus Dr Azam Mohd Nor, Dr Thahira and Dr Mahfuzah Mohamed (author on extreme right)

Having just attended the 30th Annual Meeting of the European Society for Paediatric Infectious Disease (ESPID) in Thessaloniki, Greece held from 8th to 12th May 2012, the past 1 week has been a week of different experiences.

Firstly during the ESPID meetings, there were talks on a wide range of topics including vaccines with discussions on pertussis and the possible need to vaccinate adults for the cocooning effect on young infants, influenza vaccines including a new intranasal live influenza vaccine. Other topics covered included neonatal infection (prevention of group B Strep), new antibiotics and antifungals and emerging infections in the region eg. Q fever and EHEC outbreak. There were various interactive Meet the Expert sessions on UTI management, vaccinations in special hosts (eg in HIV patients, splenectomised patients) and group A Streptococcal diseases.

I particularly enjoyed the excellent lecture given by the Bill Marshall Award recipient 2012 Dr Andrew Gant (UK) on the topic "Of Man and Micro: the child as the father of the man". It was

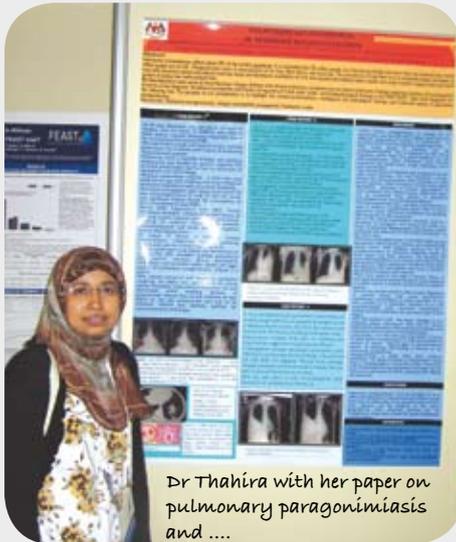
an entertaining lecture on various patients who had problems involving paediatric infectious disease and immunology. (Eg. ever heard of Job's disease?). He managed to effectively link infectious diseases with immunology in a manner that was both entertaining and educational. From the social programme, we were entertained by a very good performance by the Methodios Choir of Thessaloniki made up of children and adolescent members during the opening ceremony.

## First visit

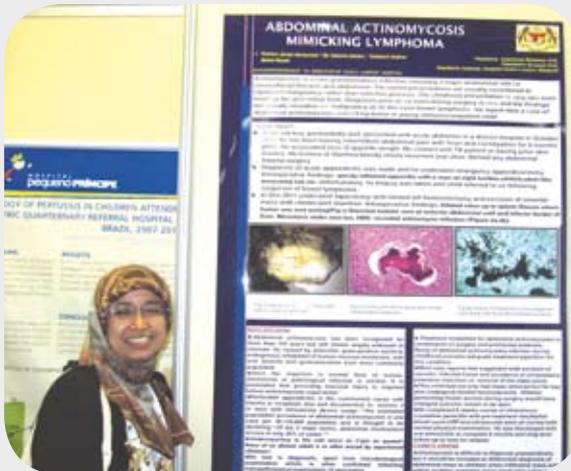
Secondly, this is the first visit to Thessaloniki for the whole Malaysian group and I think nobody had heard of this city before the ESPID conference. It is actually the 2nd biggest city in the country and is located in Northern Greece. Certain parts of the city is old and full of history dating as early as 315 BC (and as far back as 2000 BC!) and involved the Macedonian Kingdom, Roman, Byzantine and Ottoman Empires with archeological sites within and in close proximity of the city. In fact, excavations for a subway track in front of the hotel we stayed in revealed an old Roman market place that will have to be preserved as a museum. Sites

## Sole Malaysian Poster at ESPID in Thessaloniki

Dr Thahira Jamal Mohamed from HKL put up two posters at the ESPID - Pulmonary Paragonimiasis and Abdominal Actinomycosis presenting as Lymphoma. Congratulations to her and well done.



Dr Thahira with her paper on pulmonary paragonimiasis and ....



....abdominal actinomycosis mimicking lymphoma

visited included the White Tower, church of Agia Sophia (Wisdom of God), Eptapyrgio (the Byzantine acropolis of Thessaloniki) and the museums which gave comprehensive historical accounts of Thessaloniki as an important port city. A trip to the legendary Mount Olympus, the home of the mythical god Zeus, was just too good to turn down no matter how expensive the trip!

## Greek alphabets and food

The Greek language is an absolute challenge with the use of different alphabets and being unable to even pretend to pronounce the words was a bit frustrating. It reminded me to be more helpful/considerate to people of other cultures and languages back home. We all appreciated what "This looks like Greek to me" literally meant. Greek food was typically accompanied by olive oil and included salads, seafood, pastas and we attempted to overdose ourselves with mushrooms this past week too.

Lastly, this trip gave us the opportunity to meet colleagues from other countries and network, as well as fellowship time with fellow paediatricians from different parts of Malaysia where there was exchange of ideas/information in both medical and nonmedical issues, mainly politics and finance. The whole experience of the intellectual content of the ESPID conference, the hot Greek weather, the interesting relics within the city, the different culture and food, the friendly people, and interesting colleagues make this trip an especially memorable one for all. After all, we are not sure if we can make it to the next one in Milan, Italy next year! ☑

**June Liew**

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Sabah



## Congratulations

**Dr Hussain Imam Hj Muhammad Ismail** was conferred the Darjah Setia Pangkuan Negeri (D.S.P.N) which carries the title Dato' on the 14th of July on the occasion of the 74th birthday of the Yang Terutama Yang DiPertua Negeri Pulau Pinang.

# Retirement or Re-tyre-ment

**My good friend Dr. Gopalkrisnan, a retired Anaesthetist who lives in Perth, once met His Holiness Sai Baba in India and asked His Holiness his views on retirement. Sai Baba looked him straight in the face, and with a cheeky smile said "The word my good friend is 're-tyre'. You then set off on a new path". He then walked away leaving Gopal astounded by this man's take on a subject that we all dread. When I heard this story from Gopal I realised in many ways it describes my present thoughts on this subject of retirement.**

After graduating in 1960, I have spent most of my time in Paediatrics, first as an acting registrar, then as a registrar in the Paediatric Unit in Penang G.H. and later as a consultant, 3 years as Kelantan's first Paediatrician (see 'My Kelantan Connection' in the E-BERITA 2010), 5 years with the Penang G.H. and later for 29 years with the Gleneagles Medical Centre in Penang.

All I can remember of my working life, was running a Paediatric Unit, and most of the time single handed, and being on daily call, with my family hardly ever seeing me. There were so few Paediatricians in the early 70's. Many states were without one, and Paediatrics was then managed by adult Physicians. I still remember having to cover Alor Star when I was in Penang.

I joined the G.M.C in 1977 and once again it was a one man show. After 5 years working alone day and night, I had a heart attack. My wife contacted Dr. Rama who was then in Seremban, and managed to persuade him to join me. Thankfully he accepted the offer and we had a good run sharing our calls until 1995 when I needed a CABG. The management felt that we should take in a third Paediatrician and we were fortunate to get Dr. Jessica a delightful girl with neonatal experience - my bane.

Life was less stressful now that I was sharing the first calls once in three days. Even so we were called up at least 2-3 times at night whenever we were on call. That was because the M.O.'s recruited by the centre had no Paediatric experience and were reluctant to manage Paediatric cases. We saw all our admissions, clerked all our cases and did all the procedures.

In 1982, I decided to send my children to Sydney for their education. Unfortunately the separation began to take a toll, especially on my wife, who kept 'bugging' me, and wanted to know when I was going to emigrate to Australia and start a practice there. Unfortunately, in 1992, Australia

closed the door to foreign graduates. My registration with the General Medical Council became null and void. I now had no choice but to wait until it was time for me to retire.

I first promised my wife that I would make the move in 2000, but when 2000 came I started to stall again. I still remember, with tears streaming down her cheeks, she said "I know you Para. You will never retire. You are a workaholic". And she was right. The thought of retirement was unthinkable.

## Finally...

Then it finally happened. The decision to move was made for me. In 2006 my daughter, a Dentist, was expecting her second child. She was desperate as she knew she needed help to look after her children to allow her to work. I realised the time had come for me to call it a day. I promised her that we would be there to help her out. I was almost 70 and I realised I had a 'good run'. In any case the night calls were killing me! My partners tried to persuade me to stay back and offered me a less stressful roster. I refused because I knew it would be unfair to them. I needed to make a clean break. I can still remember my last day on call. I was hoping it would uneventful. At 6.00am my phone rang. "Emergency Caesar. BP dropping rapidly. Dr. Kana is on the way. Come immediately!!" I rushed over, praying that the baby would come out screaming, but as luck would have it the baby came out flat (in passing nurses hate to be on duty when I am on call. They insist that all the problem cases seem to turn up then). Anyway, thank God the baby, after some heroics by me, came through alright. I remember as I walked back to my apartment (I live 10 minutes walking distance from G.M.C). I was so relieved that it was my last call day! Hurrah! No more calls. After 46 years of night calls I felt I had done enough.

And thus began my re-tyre-ment. We had sent all our worldly 'possessions' to Sydney, and spent the last few days in Penang in a hotel. We attended the many farewell parties given to us with mixed feelings. Having spent most of our life in Penang where all our friends were, we knew it would take us some time to get over this move. But awaiting in Sydney was our family. We knew it was time to re-tyre and start on a new path.

## Monumental Decision

Reading through this rather long preamble, it is obvious that each of us will have our own reasons, our own time frame, when to make this monumental decision to our life - and believe me it is truly a monumental decision!!

In my case, my child's cry of anguish for help was the deciding factor. I was however fortunate to start this new phase in my life in Sydney which offers so much both in culture and

entertainment, apart from being one of the most beautiful cities in the world - the spectacular Harbour, Sydney Bridge and the magnificent Opera House.

I soon fell into my new routine. Helping to look after a six month old baby was a challenge but it was also very rewarding. I also started visiting the local library, which is ten minutes from where I live, and started reading some very interesting books - Mahathir the Malaysian Maverick, Chin Peng, Robert Mugabe, and introduced myself to Award winning Indian Authors like Arundhati Roy, Aravind Adiga, Mishra Pankaj, Shashi Tharoo and numerous biographies of interesting people. The book that touched me most was by Waris Dirie, the Somalian Supermodel, who has campaigned for the abolition of Female Genital Mutilation (F.G.M). I now read 2-3 books at one time and find it very rewarding changing from serious reading to a nail biting thriller by Jeffrey Archer.

I also had a go at writing and hence my two contributions to the Berita MPA and my earlier tear jerker "Rambong" - the story of how I met my wife and our early days, for the benefit of our children.

I have also continued my passion for golf by playing regularly a round with my wife who is an avid golfer, at our local golf club. I walk daily at the Centennial Park which is 15 minutes from where we live. This park was given to Sydney by Queen Victoria in 1905, and is maintained as it was in 1905. Walking around the tall majestic trees with delightful overhanging branches, watching and feeding the beautiful black swans, and the cockatoos with bread crumbs as they gather around me, seeing the odd hare scamper about in delight, and spending time at the exotic Rose garden with its heavenly bouquet, is a very special experience.

### Keeping Abreast

I attend the weekly Grand Rounds at the Sydney Children's Hospital and the yearly Paediatric Course in March. This keeps me abreast of the recent developments in Paediatrics. The internet helps to fill in the gaps.

Having a special interest in wine, and having been a member of two wine clubs in Penang, I started a wine club with my friends. We are a group of 7 couples with my daughter and we meet every 2 months rotating the venue amongst the seven of us. We even went to Penang and had a Tasting/Dinner at the E&O in Penang last year. I do the minutes, and the logging, and the tasting notes and the photos of the wine bottles. Its a new skill I have developed.

The best part of re-tyreing is being part of seeing my 2 grandchildren grow up and being part of all their activities - their school concerts, attending grand-parents day at their school (in passing I never got to attend any of my own children's activities in school - no one to cover for me) and celebrating their birthdays. The little 6 month old baby we helped to look after is now attending regular school.

### Easy? Regrets?

Was retyreing easy for me? The answer is no! It took me almost a year to get my tyres adjusted, fine tuning the alignment to my wheels to stop the constant wobble, as I drove down my new path.

I have often been asked if I have regrets or do I miss any part of my professional life. I was fortunate enough to have the opportunity to serve the M.P.A and the Penang Medical Practitioners Society as its President and to travel to countries like Korea, Japan, Hongkong, Philippines, Bangkok, Taiwan, India, Beijing, Egypt, Spain, France, and America to attend the various Paediatric Meetings with fellow Paediatricians (special mention of my dear friend Sam Abraham and the hilarious fun we had with him) and working with these committees, and organising the Annual Meetings was challenging but exciting. Yes I do miss these special moments.

I also miss the challenge of grappling with a difficult Paediatric case, the early morning rounds with my two colleagues discussing cases, when my patients charge into my clinic screaming "Dr. Para I want two lollipops, one for my little brother, and one for me" the innocence of children (my reason for opting to do Paediatrics) but most of all I miss the special moment when a grandmother brings her daughter, whom I looked after as a child, carrying now her grandchild and smiles and says "Dato, this is my first grandchild. I want you to be her Paediatrician". That is a very special moment.

I now realise there is no fast rule to when to retire, why you need to retire, what you will miss most. Each person must make the move at the right time and for the right reasons. But having made the decision, the rule Sai Baba advocates applies - retire and set off on a 'new path' and never look back.

As I watch my two grandchildren screaming and fighting over whose turn it is with the Nintendo S, as we sit as a family enjoying our Sunday lunch with my wife's exotic Penang Hokkien Mee, sipping a glass of St. Clair Sauvignon Blanc, as I curl up in my favourite chair enjoying Shashi Tharoo's brilliant book 'The Elephant, The Tiger and the Cell Phone, Reflections of India', as I sit at the grand round at the Sydney Children's Hospital listening to Adam Jaffe discussing some new thoughts on Asthma, as I walk around the Centennial Park marvelling at the beautiful leaves changing colour with the season, as I sit in the Sydney Opera House in my favourite seat, looking down mesmerized by the brilliance of Lang Lang as he plays Rachmaninoff's piano concerto No 2, as I walk around The N.S.W Art Gallery enjoying this year's Archibald paintings, as I take a ferry ride around the Sydney Harbour, watching the hundreds of sailing boats weaving their way around, as I watch a new Cruise Ship making its way into the Harbour and my wife reminds me of the Baltic Cruise we will be doing this July, I feel blessed to have this period of re-tyre-ment. These experiences 'guild the sunset of my life'

Eizabeth Cady Stanton in 1885 gave a brilliant speech on the pleasures of aging. I would like to end with her beautiful poem which captures the spirit of this special period in our lives.

***"For age is opportunity, no less,  
Than youth itself, though in another dress  
And as the evening twilight fades away  
The sky is filled with stars invisible by day. ☺***

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# The S.T.A.B.L.E. Program

How we ended up in Chicago, USA



From left : Dr. Cheang Hon Kit, Mason M. Meinhold (S.T.A.B.L.E. coordinator), Kristine Karlsen, Dr. Hwang Yee Chern, Dr. Pong Kwai Meng

It all started after Kwai Meng returned from Sydney, Australia in 2009 when he had completed his 2 years of neonatal training at the Royal Hospital for Women. During his stint with NSW Newborn and Paediatric Emergency Transport Service (NETS), a neonatologist from Canada introduced the S.T.A.B.L.E. program to him. Subsequently, he wrote to the author/founder of the program, Kristine Karlsen, who was so helpful in providing him with various teaching materials of the program, i.e. the S.T.A.B.L.E. learner and instructor manuals, CD Roms and teaching slides to initiate the program in his hospital.

After the first informal training session of the program for 22 nurses in Penang Adventist Hospital in March 2011, there was very good feedback from the nurses about the program. Therefore, Kwai Meng decided to share this program with his colleagues in Penang.

Hon Kit and Yee Chern (Three of us are neonatologists from the Penang Paediatric Network who share the same passion in teaching) shared the same idea that we should introduce this program into Malaysia as the

content of this well constructed program is extremely useful to all healthcare workers dealing with sick and premature infants. In order for us to implement this program efficiently, we decided that we should be trained and certified as lead instructors to meet the qualification and requirement set by the S.T.A.B.L.E. Program.

The idea was well received by Allied Health Care Centre of Excellence (AHCoE) which is an organisation aiming to promote allied health professional training in the northern region. With its sponsorship, we started our journey to Chicago to attend the National Instructor Course and Intro to Simulation and the S.T.A.B.L.E. Scenarios Workshop on 27-29 April 2011.

The National Instructor course held at Chicago which we attended set a new record for state and international representation. There were total number of 62 delegates, consisting of NICU nurses, doctors and a respiratory therapist from 26 states in USA and 3 countries (Saudi Arabia, Mexico and Malaysia). Everybody was impressed with our enthusiasm to travel

all the way from Malaysia to attend the instructor course at Chicago.

Kris Karlsen, the founder and author of STABLE Program conducted the 2-day National Instructor course single-handedly! It was really amazing to find out that all these years, she actually conducted all the S.T.A.B.L.E. National Instructor courses, which are held three times per year in U.S.A.

The most stressful part of the course was to pass the pretest with a minimum score of 70% in order to be certified as a lead instructor. Luckily the questions were not too tough and we all made it!

It was quite an eye-opening experience for us to attend the national instructor course along with other local participants, who are mostly senior neonatal nurses such as neonatal nurse practitioners, NICU clinical nurse specialists and NICU nurse educators. We were deeply impressed with the professionalism and skillfulness of this group of S.T.A.B.L.E. instructor-to-be neonatal nurses in handling neonatal emergencies and situations when we observed how they performed during the simulation sessions. It was a testimony to show the effectiveness of the S.T.A.B.L.E. program as part of their training to be a neonatal intensive care nurse. In fact, we learned that the S.T.A.B.L.E. program completion certificate is a pre-employment requirement to work in nurseries, NICU and labour rooms in the United States.

### What is S.T.A.B.L.E. Program?

Hundreds of times each day, in hospitals and communities around the world, newly born infants become ill and require specialized care. Each member of the health care team—nurses, physicians, therapists and assistants—must know what to do for the sick infant. Their care must be provided in a timely, efficient, anticipatory, and effective manner. This early transitional care affects not only the immediate health of the infant, but also the infant's long-term outcome.

Many nurses, physicians, and other members of the health care team have limited experience in stabilizing sick newborns. It is often a challenge for hospital staff to maintain knowledge and skill in this area. The Neonatal Resuscitation Program (NRP) focuses on delivery room resuscitation. Following resuscitation, caregivers must turn to other resources for the necessary ongoing and supportive care.

The S.T.A.B.L.E. Program was developed to meet the educational needs of health care providers who must deliver this important stabilization care. S.T.A.B.L.E.

education is critical to the mission to reduce infant mortality and morbidity and to improve the future health of children and their families.

S.T.A.B.L.E. is the most widely distributed and implemented neonatal education program to focus exclusively on the post-resuscitation/pre-transport stabilization care of sick infants. Based on a mnemonic to optimize learning, retention and recall of information, S.T.A.B.L.E. stands for the six assessments and care modules in the program: **S**ugar, **T**emperature, **A**irway, **B**lood pressure, **L**ab work, and **E**motional support. A seventh module, Quality Improvement stresses the professional responsibility of improving and evaluating care provided to sick infants.

First introduced in US and Canada in 1996, S.T.A.B.L.E. has grown internationally to include instructor training and courses in more than 45 countries including Qatar, Romania, Spain, Thailand, Uganda, United Arab Emirates, United Kingdom and Vietnam etc. Of course, the program is available in Malaysia now! The program has been translated into Spanish, Lithuanian, Latvian, and Romanian. Currently, there are more than 3,600 registered instructors worldwide and more than 225,000 neonatal healthcare providers have completed the S.T.A.B.L.E. Learner course.

In 2003-2004, the March of Dimes conducted an extensive review of the program. Reviewers included nationally known physicians and nurses in the field of neonatal care. The experts agreed that the S.T.A.B.L.E. Program is accurate and of high quality, meets an important need, and is relevant to the March of Dimes mission and our prematurity campaign. The March of Dimes has endorsed the S.T.A.B.L.E. program for use by health caregivers.

In 2006, Executive Committee of the American Academy of Pediatrics (AAP) Section on Transport Medicine formally reviewed the S.T.A.B.L.E. program and concluded: "The S.T.A.B.L.E. course is the pre-eminent educational program for pre-NICU and transport team professionals alike on the essentials in the management of unstable neonates awaiting transport and NICU admission."

### The Founder of S.T.A.B.L.E. Program

Dr. Kristine Karlsen is the National Program Director, Founder and Award-Winning Author of the internationally recognized S.T.A.B.L.E. Program. She is a neonatal nurse practitioner with 26 years of working experience in Level 3 NICUs and transportation of sick neonates in the Intermountain Healthcare System in Utah. She is actively involved in neonatal education



Kris giving the didactic lecture at the instructor course.

for healthcare professionals. Dr. Karlsen is a skilled, entertaining, and knowledgeable lecturer, who participates frequently in conference presentations both nationally and internationally. Her research interests include methods to improve neonatal outcomes, the educational process and teacher attributes.

### How is the program administered?

The S.T.A.B.L.E. Program Learner Course involves an eight-hour, interactive presentation by an expert in neonatal nursing or medicine. Continuing education credits are provided by individual instructors. Instructor courses are offered throughout the year in USA to prepare lead instructors for course presentation. There is a shorter version of the program (5 hours) which is also called a physician edition and renewal course.

### Who should take the S.T.A.B.L.E. Program Learner Course?

Stabilisation is a team effort! Any health caregiver who is involved with post-resuscitation or pre-transport care of sick newborns or who provides well-baby care:

**Physicians:** Pediatric, ER and family practice physicians, including residents

**Nurses:** RNs working in labour rooms, postpartum, nursery, ER; nurse midwives; nursing assistants

**Others:** Respiratory therapists; pre-hospital providers (Emergency Medical Technicians and paramedics)

Participants must achieve a minimum passing score of 85% in the post-test to be awarded the Learner Course completion cards. Similar to NRP, the cards are valid for two years. Therefore, renewal is recommended every two years.

### An introduction to simulation: S.T.A.B.L.E. Program

During the Chicago trip, we also managed to attend a full-day workshop of Introduction to Simulation of S.T.A.B.L.E. Program on 29 April 2011. The Simulation workshop is designed to introduce students to the principles of simulation-based-training. This interactive seminar includes an overview of how to accomplish simulation using a holistic construct of cognitive, behavioral and technical skills. Methods in briefing students for the simulation experience, facilitator and technician considerations, how to run a scenario, debriefing do's and don'ts, and what to expect from high fidelity simulation mannequins were taught and discussed. We also learned more about the features of the high-fidelity neonatal mannequin- Gaumard's Neonatal Hal. (Available in Malaysia too.)

### The S.T.A.B.L.E. Program: Cardiac Module

The S.T.A.B.L.E. - Cardiac Module is one of the modules available for the S.T.A.B.L.E. Program. It is used as a stand-alone presentation/course for physicians, nurses, respiratory therapists, and other health care providers. It provides general guidelines for the assessment and stabilization of neonates with suspected congenital heart disease (CHD).

### The S.T.A.B.L.E. Program: Physical Exam and Gestational Age Assessment Module

This module supplements the S.T.A.B.L.E. Program Learner Course or can be used as a stand-alone presentation for interns, residents, nurses, respiratory therapists, and other health care providers. Highly visual with more than one hundred ninety beautifully created and animated slides to help students learn everything from Ballard gestational age assessment to a head-to-toe physical examination and immediate stabilization of neonates with various surgical conditions including omphalocele, gastroschisis, tracheoesophageal fistula, midgut volvulus, subgaleal hemorrhage, and more. ☑

To find more information about the S.T.A.B.L.E. Program, please log on to

<http://www.stableprogram.org>

or contact us at the following e-mail address:

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## Local Venues

**14th Asia Pacific Congress of Pediatrics (APCP) & 4th Asia Pacific Congress of Pediatric Nursing (APCPN)**

Date : 8th -12th September 2012  
 Venue : Borneo Convention Centre Kuching (BCKK)  
 Organizer : Asia Pacific Pediatric Association  
 Host : Malaysian Paediatric Association  
 Email : [secretariat@apcp2012.org](mailto:secretariat@apcp2012.org)  
 Website : [www.apcp2012.org](http://www.apcp2012.org)

**10th Asia Pacific Conference on Human Genetics**

Theme : Genetic and Genomic Medicine: Working Together Towards Health for All  
 Date : 5th – 8th December, 2012  
 Venue : Crowne Mutiara Plaza, Kuala Lumpur  
 Tel : 603-2162 0566  
 Email : [info@apchg2012.org](mailto:info@apchg2012.org)  
 Website : [www.apchg2012.org](http://www.apchg2012.org)

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**Dr Oon Meng Kar**  
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## International Venues

**Inaugural Wong Hock Boon Paediatric Masterclass 2012**

Date : 24-25 August 2012  
 Venue : Singapore  
 Email : [paev15@nus.edu.sg](mailto:paev15@nus.edu.sg)

**4th World Congress of Pediatric Gastroenterology, Hepatology and Nutrition (WCPGHAN)**

Date : 14-18 November 2012  
 Venue : Taiwan Society of Pediatric Gastroenterology, Hepatology and Nutrition  
 Tel : + 886 2 2577 6096 ext.29  
 Fax : + 886 2 2577 6091  
 Email : [secretariat@wcpghan2012.com](mailto:secretariat@wcpghan2012.com)  
 Website : <http://www.wcpghan2012.com>

**CUHK Sleep 2012**

Conference on Sleep Medicine  
 Date : 20 – 21 October, 2012  
 Venue : Postgraduate Education Centre, Prince of Wales Hospital, Shatin, Hong Kong

**V Iberoamerican Congress of Pediatric Surgery, XVIII**

Colombian Congress of Pediatric Surgery and WOFAPS Annual World Area  
 Date : 21st – 25th August, 2012  
 Venue : Cartagena De Indias, Columbia  
 Email : [kdavidson@paragon-conventions.com](mailto:kdavidson@paragon-conventions.com)  
 Website : [http://www.iberoamericanociruped2012.com/images/stories/English\\_info.pdf](http://www.iberoamericanociruped2012.com/images/stories/English_info.pdf)

**6th Asian Congress of Pediatric Infectious Diseases (ACPID)**

Date : 28 November – 1 December 2012  
 Venue : Colombo, Sri Lanka  
 Host : Asian Society for Pediatric Infectious Diseases  
 Tel : +65 6292 0723  
 Email : [acpid2012@kenes.com](mailto:acpid2012@kenes.com)  
 Website : [acpid2012.org](http://acpid2012.org)

**6th World Congress Paediatric Cardiology & Cardiac Surgery (WCPCCS 2013)**

Date : 17th – 22nd February, 2013  
 Venue : Cape Town, Africa  
 Host : South African Heart Association  
 Tel : +27 (0) 21 408 9796  
 Fax : +27 (0) 21 408 9954  
 Email : [info@pccs2013.co.za](mailto:info@pccs2013.co.za)

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1. Frost & Sullivan Research - Paediatric Medication Palatability Study conducted with physicians in Malaysia, September 2010.

