

Hong Kong Journal of Paediatrics

香港兒科醫學雜誌 (New Series)

An Official Publication of
Hong Kong College of Paediatricians &
Hong Kong Paediatric Society
c/o Hong Kong College of Paediatricians, Room 801,
Hong Kong Academy of Medicine Jockey Club Building,
99 Wong Chuk Hang Road, Aberdeen, Hong Kong.

Editorial Board

Chief Editor

CHAN Chi Fung (陳志峰)

Associate Editors

HON Kam Lun (韓錦倫)

IP Patrick (葉柏強)

Honorary Secretary

FUNG Cheuk Wing (馮卓穎)

Members

BUT Wan Man (畢慧文)

CHAO Sih Yin (趙式言)

FUNG Po Gee (馮寶姿)

KWAN Yat Wah (關日華)

KWONG Ling (鄭玲)

LAM Hung San (林鴻生)

LEE Mun Yau (李敏尤)

LEE So Lun (李素輪)

LEUNG SY (梁詩彥)

LIU Sze Wai (廖思維)

Lo Fai Man (盧輝文)

LUK Chi Kong (陸志剛)

WONG Hiu Lei (王曉莉)

YEUNG Wai Lan (楊慧蘭)

Immediate Past Chief Editor

CHEUNG Yiu Fai (張耀輝)

Honorary Advisors to the Editorial Board

Andrew BUSH, *United Kingdom*

Don M. ROBERTON, *Australia* David

K. STEVENSON, *USA*

GUI Yong-Hao, *China*

Business Manager

Tsoi Nai Shun (蔡廸舜)

Publisher

Hong Kong Journal of Paediatrics is published by
Medcom Ltd, Flat E8, 10/F, Ka Ming Court,
688-690 Castle Peak Road, Kowloon, Hong Kong
SAR. Tel: (852) 2578 3833,
Email: mcl@medcom.com.hk

Indexed in EMBASE/Excerpta Medica, Science
Citation Index Expanded (SCIE) and Scopus

Website: www.hkjpae.org

ISSN 2309-5393 (online)

ISSN 1013-9923 (print)

Editorial

The Diversity of Paediatric Problems, How Much Do We Expect to Know?

In recent years, due to rapid advancement in technology and the trend of subspecialisation, disease mechanisms are becoming more complex, and many new disease categories evolved. Facing with the knowledge explosion, the paediatric trainees are facing with a new challenge of what constitutes the “core knowledge” in general paediatrics that they have to know. In fact, it is difficult to draw a line but inarguably is that nothing can replace the exposure to actual clinical cases. Sharing of experience of clinical cases in journal is one of the possible ways to improve exposure.

In paediatric practice, some common complaints may mask the underlying relative uncommon conditions. The consequence is delay in diagnosis and treatment. For example, headache with or without “blurring vision” is a common complaint. This issue, Kokbiyik et al described a series of 9 patients who suffer from pseudotumor cerebri within a 2-year period at a University Hospital. More than 70% of them presented with headache and 33% have blurred vision. Upon examination, papilloedema can be found in all patients and all except one are bilateral. MRI and CSF opening pressure by lumbar puncture can be normal in some patients. With proper diagnosis, all children with pseudotumor cerebri responded to oral acetazolamide within 2 to 3 weeks and have full resolution of symptoms. While in adult, obese women of childbearing age are the risk factors but in children, especially for the young children (<12 years), there is no such association. Aware of this condition will prevent this group of children suffering from more serious consequence.

In recent years, one of the common problems in infectious disease is the emergence of Carbapenem-resistant *Enterobacteriaceae* (CRE). In the study by Kiyomet et al, it was found that 79/496 (15.9%) neonatal or paediatric patients were found to be colonised with CRE and 14 of these 79 (17.7%) CRE colonised patients developed infection related to CRE. Among them, 10/14 (71.4%) are neonates and UTI accounts for >50% of the route of infection. Only 2/14 infected patients died of ventilator associated pneumonia and septicaemia respectively. Among Chinese children, a recent review of annual reports (2014-2019) from the survey of hospitals at Zhejiang province in China showed that the prevalence rate of CRE among children was only 2.3% (Wu YC, et al China CDC weekly 2021). But the CR *Acinetobacter baumannii*, and CR *Pseudomonas aeruginosa* can be as high as 14.7% and 9% respectively. It was also mentioned that that the prevalence rate is in fact lower than the national survey result. We don't have any local data on children but based on personal communication with local microbiologist, 3% of local culture for bacteria has CRE. The prevalence of other CR species may be even higher based on the report from China. We

must exercise caution in implementing hygiene measures to prevent the upsurge of CR bacteria in our community.

Concerning the paper on the association between breast feeding practice and developmental delay, it is surprising to find that children with parents having higher educational level and higher income are more prone to developmental delay. These children also have a lower breast-feeding rate. As we know, association study is different from causation study and the result should not be interpreted as breast feeding can prevent developmental delay. On the other hand, we expect parents with higher educational level and income may also have more busy working schedule. Therefore, they may not have enough time to provide breast feeding after their maternity leave. They may also spend less time to interact with their young children. It is partly supported by the fact in this study that parents working away from their home base area were also associated with lower breast-feeding rate and higher developmental delay of their children. Therefore, developmental delay is probably due to decrease contact time between the children and their parents. We are fortunate in Hong Kong that most middle-class household can afford to have domestic helper to take care of the family and it will be interesting to find whether we have similar association in our local scenario.

Then we have an article on the mental health status of children and their parents who were put under quarantine because of suspected COVID infection. Such isolated policy has been imposed in many countries to prevent the spreading of the COVID infection. Unfortunately, affected children often must separate from their parents and family for almost 14 days. We can foresee that it will have a negative impact on the mental health status for both the children and their parents. This study found out that the main effect is on the sleeping pattern, anxiety and depression of the involved children and their parents. Similar observation of adverse outcome in psychosocial development, quality of life and even physical health can

be found in reports related to various social isolation or knockdown policy during the COVID period. How to strike a balance between public health welfare and individual psychosocial concerns is a highly controversial topic. As paediatrician, our responsibility is to identify potential adverse factors affecting children's health and development and report them in a unbiased manner. Then the policy makers can balance their decision based on all available evidence-based data before making appropriate action.

Finally, we have a report on perinatal testicular torsion, it is another uncommon paediatric disease with the estimated incidence from 6/100,000 to 11/100,000. The warning sign is a baby of <30 days presents with an erythematous swollen scrotum and a small testis, which is painless. It is often associated with hydrocoele on the contralateral side. The affected testis, when detected, often beyond salvage for it is already necrotic. How to protect the remaining testis is the first priority. But rarely, it can be bilateral, and the approach is to try to fix the less affected side. It is a condition that both paediatricians and paediatric surgeons must be aware for early intervention may save a testis.

The original papers of this issue include not only problems encountered in hospital but also those found day in and day out in general paediatric practice. Awareness of these condition will avoid unnecessary delay and harm to our patients. As advocate of paediatric health and development, we should also pay attention to adverse factors that may compromise the normal growth of children and try to prevent them from happening. Some relevant local study should be performed which can help us to understand our situation as compared to other countries with different culture and socio-economic status.

GCF CHAN
Chief Editor