

مؤتمر صحة الدولي الخامس عشر لطب الأطفال 15th SEHA INTERNATIONAL PEDIATRIC CONFERENCE

18-20 March, 2021

VIRTUAL
CONFERENCE
Abu Dhabi, UAE



CONFERENCE BOOK

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Welcome Message



Dr. Anwar Sallam



Dr. Jamal Al-Jubeh



Dr. Walid Kaplan

Dear Colleagues,

On behalf of the scientific and organizing committees, it gives us immense pleasure to welcome you to the **"15th SEHA International Pediatric Conference (SIPC)"** being held on **18 - 20 March, 2021 virtually** in Abu Dhabi, UAE.

While we may not be able to reunite together in person this year, we are looking forward to your participation and engagement in a truly unique and dynamic Congress. This online scientific assembly allows us to continue to bring forth the best in pediatric research and clinical practice to our attendees around the globe. You will enjoy SIPC first-ever digital conference and exhibition, where the latest tech in the industry will be showcased, and you will be able to virtually connect with more than 2000 colleagues, friends and mentors.

Building on the success of SEHA Pediatric Conference in 2020, the 15th SIPC is an innovative, informative and a unique international platform reflecting the direction of pediatrics in the 21st century and offering a wide range of diversions to participants of all backgrounds.

The program aims to discuss the recent advances and emerging trends in the diagnosis and management of common problems in general pediatrics, and all pediatric sub-specialties such as hematology/oncology, endocrinology, gastroenterology, cardiology, and many more. This unique learning experience offers an exclusive opportunity for investigators across the globe to communicate, network, and perceive new scientific innovations.

The scientific program features some of the world's leading expert speakers from premier medical institutes and universities in the United States, Europe, Asia, and the Middle East, in addition to an elite roster of renowned local speakers sharing recent advances and innovations to encourage exchange of knowledge, experience and best practices for the betterment of child health.

As the premier event, we have developed a high quality scientific program with your interests in mind. We introduced more focused sessions that will feature cutting edge presentations, key note lectures, updates of multiple topics and expert review, special panel discussions, debate sessions and livelier interaction with leaders and experts.

We wish you a very productive and successful conference and look forward to seeing the results of your deliberations put into practice.

Dr. Anwar Sallam
Conference Chair
SEHA-Group Chief Medical &
Clinical Affairs Officer,
Abu Dhabi, UAE

Dr. Jamal Al-Jubeh
Conference Co-Chair &
Chair-Organizing Committee
Chair of Department-Pediatrics
Medical Affairs, SKMC Abu Dhabi, UAE

Dr. Walid Kaplan
Chair - Scientific Committee
Chairman of the Department of Pediatrics
Tawam Hospital, Al Ain, UAE

Organizing Committee

- Dr. Jamal Al Jubeh - Chair, Sheikh Khalifa Medical City, Abu Dhabi, UAE
 - Dr. Taisser Atrak - Sheikh Shakhbout Medical City, Abu Dhabi, UAE
 - Dr. Abdelaly M Dabosy - Sheikh Shakhbout Medical City, Abu Dhabi, UAE
 - Dr. Mohd Nidal Nawras Al Rajjal - Al Dhafra Hospitals, Abu Dhabi, UAE
 - Nisreen Ibrahim Al Haj - Sheikh Shakhbout Medical City, Abu Dhabi, UAE
-

Scientific Committee

- Dr. Walid Kaplan - Chair, Tawam Hospital, Al Ain, UAE
 - Dr. Elsadeg Sharif - Tawam Hospital, Al Ain, UAE
 - Dr. Eman Taryam - Tawam Hospital, Al Ain, UAE
 - Dr. Salma Elkhabier - Sheikh Shakhbout Medical City, Abu Dhabi, UAE
 - Dr. Ibrahim Saddig - Ambulatory Healthcare Services, Abu Dhabi, UAE
 - Dr. Sareea Al Remeithi - Sheikh Khalifa Medical City, Abu Dhabi, UAE
 - Dr. Basheer Tharayil - Sheikh Khalifa Medical City, Abu Dhabi, UAE
 - Dr. Bilal Mohammad - Sheikh Khalifa Medical City, Abu Dhabi, UAE
-

Conference Highlights

- General Pediatrics
- Pediatric Rheumatology
- Endocrinology
- Genetics & Metabolic
- Gastroenterology
- Pulmonology
- Paediatric Hematology/Oncology
- Infection
- PICU
- Cardiology
- Neurology
- Allergy
- Immunology
- Nephrology
- Emergency

Conference Objectives

At the end of this educational program, participants will be able to:

- Review the latest evidence and best practices for the management and treatment of different health problems in children to achieve excellence in pediatric care
 - Describe fundamentals of quality improvement strategies for primary and acute pediatric care
 - Evaluate and diagnose a selected group of common pediatric problems using the most updated evidence based tools and apply it appropriately to fit regional special needs.
 - Review practical real-life cases and pitfalls in various pediatric sub-specialties.
 - Discuss all aspects of clinical and basic research related to Pediatric Rheumatology & allied subjects
 - Improve the well-being of children affected by rheumatic musculoskeletal diseases
 - Examine solutions to real-world clinical problems through case-based learning sessions
 - Provide insight into patient needs and experiences and improve clinical practice
 - Apply new knowledge in the diagnostic and therapeutic modalities presented in selected topics
 - Formulate an appropriate approach that is suitable for local experiences in some of the controversial issues in pediatric sub-specialties.
 - Perform hands-on workshops given by world-leading experts and tutors
 - Meet global experts in Paediatrics, Paediatric Gastroenterology, Hematology, Pulmonology, Infection Diseases, Cardiology, Neurology, Immunology, PICU and Emergency.
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Key Features

- State of the art lectures Symposium
 - Presentations by renowned speakers from all over the world
 - Poster presentations and world class exhibits
 - Interactive sessions
 - Case Discussions
 - Hands-on Workshops
 - Platform for Global Networking
 - Connecting Scientific Community
-

Target Audience

- Paediatricians
- Pediatric Subspecialists
- Family Medicine Physicians
- Paediatric Hematologist/Oncologist
- Emergency Medicine Physicians
- Residents & Fellows
- General Practitioners
- Dieticians
- Specialist Nurses and Therapists
- Nurses
- Pharmacists
- Medical Students
- And any Medical professional interested in Paediatrics

International Speakers

Children's Hospital of Philadelphia



Dr. James Callahan

Professor of Clinical Pediatrics, University of Pennsylvania Perelman School of Medicine
Medical Director of Global Pediatric Education
Children's Hospital of Philadelphia, PA, USA



Dr. Patrick Cahill

Robert M. Campbell Endowed Chair of Thoracic Insufficiency Syndrome, Pediatric Orthopedic Spine Surgery - Division of Orthopaedics
Children's Hospital of Philadelphia, PA, USA



Dr. Jason Anari

Assistant Professor of Orthopaedic Surgery
Pediatric Orthopaedic Surgeon
Division of Orthopaedics at Children's Hospital of Philadelphia, PA, USA



Dr. Michael Levine

Lester Baker Endowed Chair & Professor Emeritus of Pediatrics & Medicine at the University of Pennsylvania
Chief Emeritus of Endocrinology & Diabetes and Director of the Center for Bone Health
Children's Hospital of Philadelphia, PA, USA



Dr. Sanjeev Swami

Associate Professor of Clinical Pediatrics, University of Pennsylvania Perelman School of Medicine, Director of the Outpatient Infectious Diseases Clinic, Division of Infectious Diseases, Children's Hospital of Philadelphia, PA, USA



Dr. Jeffrey Gerber

Medical Director of the Antimicrobial Stewardship Program & Associate Chief Clinical Research Officer of CHOP Research Institute
Attending physician - Division of Infectious Diseases
Children's Hospital of Philadelphia, PA, USA



Great Ormond Street Hospital



Prof. Mehul Dattani

Professor of Paediatric Endocrinology
Great Ormond Street Hospital for Children & UCL GOS Institute of Child Health, London, UK



Dr. Sophia Varadkar

Deputy Medical Director & Consultant Paediatric Neurologist, Great Ormond Street Hospital for Children, London, UK



Dr. Louis Grandjean

Wellcome Trust Intermediate Fellow, University College London
Associate Professor & Consultant in Paediatric Infectious Diseases
Great Ormond Street Hospital, London, UK



Cincinnati Children's Hospital



Dr. Patrick Whitlock

Orthopaedic Surgeon & Assoc. Prof. in the Division of Orthopaedic Surgery
Cincinnati Children's Hospital Medical Center, Ohio, USA



Dr. Javier Gonzalez del Rey

Prof. of Pediatrics, Assoc. Chair for Education & Co-Director of the Cincinnati Children's Pediatric Education Center, Cincinnati Children's Hospital Medical Center, Ohio, USA



Dr. Charles Stevenson

Assoc. Prof. of Neurological Surgery & Pediatrics, Surgical Director of The Cure Starts Now Foundation Brain Tumor Center
Cincinnati Children's Hospital Medical Center Ohio, USA



Dr. Frank Biro

Prof. of Pediatrics - Division of Adolescent and Transition Medicine, Cincinnati Children's Hospital Medical Center within the University of Cincinnati Department of Pediatrics, Ohio, USA



International Speakers

Nationwide Children's Hospital



Dr. Rajesh Krishnamurthy
Clinical Professor of Radiology, Ohio State University, Radiologist-In-Chief
William E. Shiels Chair of Radiology
Nationwide Children's Hospital,
Columbus, Ohio, USA



Dr. Richard E. Kirschner
Department Chief, Plastic & Reconstructive
Surgery, Nationwide Children's Hospital,
Columbus, Ohio, USA



Dr. Lynda Villagomez
Pediatric Hematology/Oncology/
BMT Fellow at Nationwide Children's Hospital
Columbus, Ohio, USA



Children's National Hospital



Dr. Marshall Summar
Chief, Division of Genetics & Metabolism
Children's National Hospital, Washington
D.C., USA



Dr. Marc Levitt
Chief, Division of Colorectal & Pelvic Reconstruction
Children's National Hospital, Washington, D.C., USA



Dr. Gerard Martin
Medical Director Global Services C.R. Beyda
Professor of Cardiology
Children's National Hospital, Washington,
D.C., USA



Dr. Yves d'Udekem
Division Chief, Cardiac Surgery | Co-Director,
Children's National Heart Institute
Children's National Hospital, Washington, D.C., USA



Children's Hospital, Los Angeles



Dr. Rohit Kohli
Prof. of Pediatrics (Clinical Scholar)
Keck School of Medicine, University of
Southern California, USA, Division Chief,
Gastroenterology, Hepatology & Nutrition,
Children's Hospital Los Angeles, CA, USA



University of Minnesota Medical School



Dr. Aaron Kelly
Professor, Department of Pediatrics
Minnesota American Legion & Auxiliary Chair in
Children's Health, Co-Director
Center for Pediatric Obesity Medicine,
University of Minnesota Medical School, USA



International Speakers

Boston Children's Hospital



Dr. Kristin Moffitt

Asst. Prof. of Pediatrics, Harvard Medical School
Assoc. Physician in Infectious Diseases
Boston Children's Hospital, MA, USA



Dr. Jennifer Blumenthal

Instructor in Pediatric Critical Care
Medicine & Pediatric Infectious Diseases,
Harvard Medical School,
Boston Children's Hospital, MA, USA



Dr. Leslie Lehmann

Director, Clinical Stem Cell Transplantation
Program, Medical Director, International
Hematology/Oncology/BMT
Boston Children's Hospital, MA, USA



National Speakers



Dr. Walid Kaplan
Chair - Scientific Committee
Chairman of the Department of Pediatrics
Tawam Hospital, Al Ain, UAE



Dr. Eihab Al Khasawneh
Consultant Pediatric Nephrologist
Sheikh Khalifa Medical City
Abu Dhabi, UAE



Dr. Khulood Walid Khawaja
Consultant, Pediatric Rheumatology
Director of Adult Rheumatology Fellowship
Program, Sheikh Shakhbout Medical City,
Abu Dhabi - UAE



Dr. Alan Smit
Consultant Anesthesiology
Sheikh Khalifa Medical City
Abu Dhabi, UAE



Dr. Durdana Iram
Consultant, Pediatric Pulmonology
Tawam Hospital, Al Ain, UAE



Dr. Guido Hein Huib Mannaerts
Chair of Surgery
Tawam Hospital, Al Ain - UAE



Dr. Abdulla Aljneibi
Consultant, Pediatric Endocrinology
Mediclinic, Abu Dhabi, UAE



Dr. Bilal Mohammad
Consultant Physician Pediatrics
Medical Affairs, Sheikh Khalifa Medical City
Abu Dhabi - UAE



Dr. Mohamad Miqdady
Division Chief, Ped. GI, Hepatology &
Nutrition Division, Program Director,
Pediatric Gastroenterology Fellowship
Training program
Sheikh Khalifa Medical City, Abu Dhabi, UAE



Dr. Nawal Al Kaabi
Chief Medical Officer, CMO Office,
Medical Affairs, Sheikh Khalifa Medical City
Abu Dhabi, UAE



Dr. Hafis Ibrahim Ponnambath
Consultant Neonatologist
Corniche Hospital, Abu Dhabi, UAE



Dr. Mohammed Issa
Consultant Pediatrics Emergency Medicine
Tawam Hospital, Al Ain - UAE



Dr. Mohammad Fahed Abdullah
Consultant, Pediatric Hematologist /
Oncologist, Sheikh Khalifa Medical City,
Abu Dhabi - UAE



Dr. Eman Alshamsi
Consultant Pediatric Hematologist &
Oncologist, Tawam Hospital, Al Ain, UAE



Dr. Maya Mallat Yassin
Group Director of Quality
SEHA, Abu Dhabi, UAE



Dr. Mahjabeen Ilyas Khan
Director of Revenue Development Management
Finance Department
Sheikh Khalifa Medical City, Abu Dhabi, UAE



Dr. Fayeza Saif Alyafei
Chief Quality Director
Sheikh Khalifa Medical City
Abu Dhabi - UAE



Dr. Hala Abu Zaid
Chair, Critical Care Départments
Tawam Hospital, Al Ain, UAE



National Speakers



Dr. Amani Osman Hassan
Consultant Child and Adolescent
Psychiatrist, Behavioral Science Pavilion
Sheikh Khalifa Medical City,
Abu Dhabi, UAE



Dr. Mohamed Salaheldin Riad
Consultant Medical Genetics,
Program Coordinator of National Preventive
Genetic Programs in the UAE, Ministry of Health &
Prevention, UAE | Pure Health, UAE



Dr. Fares Chedid
Chief of Neonatology
Kanad Hospital
Al Ain, Abu Dhabi, UAE



Dr. Hiba Shendi
Consultant Immunologist
Asst. Prof., Tawam Hospital
Al Ain, UAE



Abstract Oral Presenters:



Dr. Ajia Syed
Research Associate
Sheikh Khalifa Medical City
Abu Dhabi - UAE



Dr. Amina Vergara Bakro
Pediatric Resident
Sheikh Khalifa Medical City
Abu Dhabi - UAE



**Dr. Almontaser Bella
Mohammed Hussein**
Specialist Physician
Pediatrics - Madinat Zayed Hospital
Al Dhafra Hospitals, Abu Dhabi - UAE



Dr. Shahd Farajallah
Pediatric Resident
Sheikh Khalifa Medical City
Abu Dhabi - UAE



Dr. Nafea Alyasi
Pediatric Gastroenterology Fellow
Sheikh Khalifa Medical City
Abu Dhabi - UAE



Dr. Mai Fathi Soliman
Pediatric Resident
Sheikh Shakhbout Medical City
Abu Dhabi, UAE



Dr. Maha Khalil Abass
Pediatric Resident
Sheikh Shakhbout Medical City
Abu Dhabi - UAE



SCIENTIFIC PROGRAM

Scientific Program

Day1, Thursday
18 March, 2021



TIME	TOPIC	SPEAKER
10:00-10:05	Welcome & Introduction	Dr. Anwar Sallam Conference Chair, SEHA - Abu Dhabi
10:05-10:10	Opening Remarks	Dr. Jamal Al Jubeh Conference Co-Chair, SEHA - Abu Dhabi
10:10-10:15	OFFICIAL INAUGURATION	Dr. Tarek Fathey Group Chief Executive Officer, SEHA - Abu Dhabi
10:15-12:10	SESSION-1 Chair: Prof. Miroslav Harjaček, UAE	
10:15-10:40	Acute Kidney Injury	Dr. Eihab Al Khasawneh, UAE
10:40-11:05	Pediatric Rheumatology	Dr. Khulood Walid Khawaja, UAE
11:05-11:30	Management of Acute Pain in Children	Dr. Alan Smit, UAE
11:30-11:55	NIV on the Medical Ward: Options and Indications (WS)	Dr. Durdana Iram, UAE
11:55-12:10	Panel Discussion	
12:10-12:40	SYMPOSIUM: Role of Sensor based technologies in Management of Type1 DM Patients & New Advancements in Flash Glucose Monitoring Technology	Dr. Walid Kaplan, UAE
12:40-13:20	BREAK POSTER VIEWING Exhibition Visit & Online Networking	
13:20-15:50	SESSION 2: Diet & weight Chair: Dr. Nadeem Abdulla, UAE	
13:20-13:45	Non-surgical Treatment for Obesity in Adolescents (Unmet needs in Adolescents with Obesity)	Dr. Aaron Kelly, USA
13:45-14:10	Surgical Treatment for Obesity in Adolescents	Dr. Guido Hein Huib Mannaerts, UAE
14:10-14:20	Q & A	
14:20-14:45	Lipid screening: Why, when, and how to manage	Dr. Abdulla Aljneibi, UAE
14:45-15:10	Effects of Sports and Energy Drinks and Artificial Sweeteners on Children	Dr. Bilal Mohammad, UAE
15:10-15:35	Treatment of non-pathological underweight and FTT	Dr. Mohamad Miqdady, UAE
15:35-15:50	Panel Discussion	
15:50-16:10	LUNCH BREAK POSTER VIEWING Exhibition Visit & Online Networking	
16:10-18:05	SESSION 3: COVID-19 Chair: Dr. Hossam Al-Tatari, UAE	
16:10-16:35	COVID-19 in children. Year In Review	Dr. Kristin Moffitt, USA
16:35-17:00	COVID antibody responses and PIMS-TS (MISC)	Dr. Louis Grandjean, UK
17:00-17:25	Epidemiology, morbidity and treatment of COVID-19 in UAE	Dr. Nawal Al Kaabi, UAE
17:25-17:50	Perinatal Outcomes in COVID 19	Dr. Hafis Ponnambath, UAE
17:50-18:05	Panel Discussion	
18:05-18:15	BREAK POSTER VIEWING Exhibition Visit & Online Networking	
18:15-20:15	WORKSHOPS DAY 1 Chair: Dr. Jozef Hertecant, UAE	
18:15-18:40	Lecture 1 The Dysmorphic Patient: When and how to investigate	Dr. Marshall Summar, USA
18:40-19:05	Lecture 2 Fatty Liver Disease	Dr. Rohit Kohli, USA
19:05-19:15	Questions	
19:15-20:15	Workshop 3 The Best diagnostic Tools in Pediatrics ED	Dr. Mohammed Issa, UAE
Parallel (1hr)	Workshop 4 Jeopardy in the Pediatric Emergency Room: An Imaging Case-based Review	Dr. Rajesh Krishnamurthy, USA
20:15-20:20	Closing Remarks Day 1	

Scientific Program

Day2, Friday
19 March, 2021



TIME	TOPIC	SPEAKER
10:00-10:05	Welcome & Introduction	
10:05-12:00	SESSION-4 Chair: Dr. Nandu Thalange, UAE	
10:05-10:30	Anemia in Children	Dr. Mohammad Fahed Abdullah, UAE
10:30-10:55	Update on the Diagnosis and Management of Growth Hormone Deficiency	Prof. Mehul Dattani, UK
10:55-11:20	Abnormal coagulation screening	Dr. Eman Alshamsi, UAE
11:20-11:45	Update on Recent Advances in Management of the Epilepsies in Childhood	Dr. Sophia Varadkar, UK
11:45-12:00	Panel Discussion	
12:00-13:15	BREAK POSTER VIEWING Exhibition Visit & Online Networking	
13:15-14:40	SESSION-5: Abstract Presentation Chair: Dr. Basheer Tharayil, UAE	
13:15-13:25	The Effectiveness of Laparoscopic-assisted Percutaneous Endoscopic Gastrostomy in Pediatric Patients: A Single-center Retrospective 9-year Cohort Study	Dr. Ajia Syed, UAE
13:25-13:35	Celiac Disease: Determining the prevalence, clinical manifestations (intestinal and extra-intestinal), nutritional status, associated co-morbidities, among the pediatric population in the Emirate of Abu Dhabi, UAE	Dr. Amina Vergara Bakro, UAE
13:35-13:45	Predictors of outcome and length of stay in Bronchiolitis	Dr. Almontaser Bella Mohammed Hussein, UAE
13:45-13:55	Blood cultures contamination & resource utilization in pediatrics hospital: A one-year retrospective review at a single tertiary care center	Dr. Shahd Farajallah, UAE
13:55-14:05	A 14-fold Increase in Multiple Magnet Ingestion in Children in Emirate of Abu Dhabi: Multi center Tertiary Center experience: We need Legislative Action!	Dr. Nafea Alyasi, UAE
14:05-14:15	Use of Antibiotics in treatment of acute pharyngitis versus Standardized guideline in the Pediatric Emergency Department in Mafraq Hospital: Comparative Study	Dr. Mai Fathi Soliman, UAE
14:15-14:25	Acute bronchiolitis drug therapy guidelines compliance rate in a cohort of hospitalized patients: A single center review	Dr. Maha Khalil Abass, UAE
14:25-14:40	Panel Discussion	
14:40-15:25	LUNCH BREAK POSTER VIEWING Exhibition Visit & Online Networking	
15:25-17:25	SESSION-6 Chair: Dr. Naser Al Zein, UAE	
15:25-15:55	COVID-19 precaution in the post vaccination era	Dr. Jennifer Blumenthal, USA
15:55-16:20	Chronic lymphadenopathy, the good, the bad, and the ugly	Dr. Lynda Villagomez, USA
16:20-16:45	Stem Cell Transplantation – Identifying the right candidate	Dr. Leslie Lehmann, USA
16:45-17:10	Hip disorders: Evaluation and Referral	Dr. Patrick Whitlock, USA
17:10-17:25	Panel Discussion	
17:25-17:40	BREAK POSTER VIEWING Exhibition Visit & Online Networking	

Scientific Program

Day2, Friday
19 March, 2021



TIME	TOPIC	SPEAKER
17:40-19:40 Chair:	WORKSHOPS DAY 2 Dr. Aysha Al Kaabi, UAE	
17:40-18:40	Workshop 5 Pediatric Colorectal Problems in Children - What does the pediatrician need to know?	Dr. Marc Levitt, USA
Parallel (1 hr)	Workshop 6 Giving a Dynamic Presentation: Writing theTalk and Making the slides	Dr. James Callahan, USA
18:40-19:40	Workshop 7 Impact of Pandemic on Training	Dr. Javier Gonzalez-del-Rey, USA
Parallel (1 hr)	Workshop 8 Pediatric Educational Opportunities at CHOP	Dr. James Callahan, USA
19:40-19:45	Closing Remarks Day 2	

Scientific Program

Day3, Saturday
20 March, 2021



TIME	TOPIC	SPEAKER
11:00-11:05	Welcome & Introduction	
11:05-13:00	SESSION-7: Quality and patient safety Chair: Dr. Hosn Saif Eddine, UAE	
11:05-11:30	An Ounce of Prevention is Worth a Pound of Cure: Near Miss Monitoring to Save Lives	Dr. Maya Mallat Yassin, UAE
11:30-11:55	Pediatric medicine between quality, productivity and profitability	Dr. Mahjabeen Ilyas Khan, UAE
11:55-12:20	Quality improvement and patient safety	Dr. Fayeza Saif Alyafei, UAE
12:20-12:45	DNR: Wishes versus reality (WS)	Dr. Hala Abu Zaid, UAE
12:45-13:00	Panel Discussion	
13:00-13:15	BREAK Exhibition Visit & Online Networking	
13:15-15:10	SESSION-8 Chair: Dr. Amar Shibli, UAE	
13:15-13:40	Allergic disorders: Treat, defer, or refer	Dr. Hiba Shendi, UAE
13:40-14:05	Clinic follow up needs of the premature	Dr. Fares Chedid, UAE
14:05-14:30	National Neonatal Screening Program in United Arab Program	Dr. Mohamed SalahEldin Riad, UAE
14:30-14:55	The Psychological Effects of COVID-19	Dr. Amani Osman Hassan, UAE
14:55-15:10	Panel Discussion	
15:10-15:55	LUNCH BREAK ANNOUNCEMENT OF WINNERS OF POSTER PRESENTATION Exhibition Visit & Online Networking	
15:55-17:50	SESSION-9 Chair: Dr. Syed Arif Hosain, UAE	
15:55-16:20	Spinal disorders: How to evaluate, when to consider surgery + pulmonary care?	Dr. Patrick Cahill & Dr. Jason Anari, USA
16:20-16:45	Update on Cerebral Palsy: Review of Treatment Paradigms for Spasticity	Dr. Charles Stevenson, USA
16:45-17:10	Vitamin D Deficiency in the Era of Precision Medicine	Dr. Michael Levine, USA
17:10-17:35	Cleft Palate Repair by Furlow Palatoplasty	Dr. Richard Kirschner, USA
17:35-17:50	Panel Discussion	
17:50-18:05	BREAK Exhibition Visit & Online Networking	
18:05-20:20	SESSION-10 Chair: Dr. Aiman Rahmani, UAE	
18:05-18:35	COVID Vaccine in children	Dr. Jeffrey Gerber, USA
18:35-19:05	Approved indications of the anti-viral in the outpatient setting	Dr. Sanjeev Swami, USA
19:05-19:35	Hypertension and the Role of Pediatric Cardiology for Identification of Coarctation	Dr. Gerard Martin and Dr. Yves d'Udekem, USA
19:35-20:05	Common Menstrual Abnormalities in Adolescents	Dr. Frank Biro, USA
20:05-20:20	Panel Discussion	
20:20-20:25	Closing Remarks End of the Conference	

**POSTER
PRESENTATIONS**

Poster Presentations

- 01 **Paraneoplastic Neuromyelitis Optica associated with ganglioneuroma** - Aisha Abdulkadir Mohamoud, Pediatric Resident, Department of pediatrics, Division of General Pediatrics, Sheikh Shakhbout Medical City, Abu Dhabi, UAE
- 02 **Kidney stones as a complication of immobilization induced hypercalcemia - Case report & literature review**
Aya Mohamed Ahmed, Pediatric Resident, Tawam Hospital, Al Ain, Abu Dhabi - UAE"
- 03 **A rare Progressive cavitating leukodystrophy due to multiple mitochondrial dysfunction syndrome 2 with hyperglycinemia: Case report** - Syeda Sana Fathima, Pediatric Resident, Sheikh Shakhbout Medical City, Abu Dhabi - UAE
- 04 **Atypical life-threatening presentation of Celiac Crisis at 12 months**
Dana Mankash, General Pediatrics, Sheikh Khalifa Medical City, Abu Dhabi - UAE"
- 05 **Rare Gastrointestinal Tumor presenting in a child with common clinical finding of iron deficiency anemia.**
Eman Mohammad Al Atrash, Pediatric Gastroenterology Fellow, Sheikh Khalifa Medical City, Abu Dhabi - UAE"
- 06 **Therapeutic Plasma Exchange in Pediatric Acute Demyelinating Neurological Disorders**
Fatima Alkindi, Division of Internal Medicine, Tawam Hospital, Al Ain - UAE
- 07 **Germ Cell Neoplasia In situ in ambiguous gonad**
Gangaiah Komala Gurusvaiah, Anatomical pathology Specialist, Purehealth Laboratories, UAE
- 08 **Cervical Spinal Cord Compression in a patient with Bruck Syndrome presenting as acute respiratory failure**
Ghada Krizam, Pediatric Specialist, Sheikh Khalifa Medical City Ajman - UAE
- 09 **A serious and devastating complication of sacral dimple**
Hajir Muqdad Alzaiwary, Pediatric Resident, Sheikh Khalifa Medical City, Abu Dhabi - UAE
- 10 **Intussusception: A Novel Presentation of COVID19- in a 3 month old Infant.**
Huda El Dannan, Pediatric Specialist, Sheikh Khalifa Medical City, Abu Dhabi - UAE"
- 11 **Presentation, diagnosis and management of multisystem inflammatory syndrome (MIS-C) in a -6year-old child with recent COVID19- infection; a case report** - Maitha Alghfeli, Pediatric Resident, Tawam hospital, Al Ain - UAE"
- 12 **A Rare Diagnosis of Gastric Heterotopia in an Infant Presenting with Stridor**
Manjiri Gupte, Specialist Otolaryngologist, Sheikh Khalifa Medical City, Abu Dhabi - UAE
- 13 **A rare presentation of Congenital Cytomegalovirus Meningitis**
Maryam Khamis Abdulla Hassan, Neonatology Fellow, Corniche Hospital Abu Dhabi - UAE
- 14 **A Case of Congenital Insensitivity to Pain and Anhidrosis in 14 months old male - A rare pathogenic variant**
Nafisa Eltag Hassan, Pediatric Resident, Sheikh Khalifa Medical City, Abu Dhabi - UAE"
- 15 **Re-classification of a variant identified in ARSB gene using biochemical, genetic & bioinformatics approaches**
Nahid Al Dhahouri, PhD student, Genomics and Genetics Department UAE University, Al Ain - UAE"
- 16 **Emergence of seizures despite presymptomatic treatment in a sibship with Biotinidase deficiency**
Olla Amer Alkhoja, Pediatric Resident, Sheikh Shakhbout Medical City, Abu Dhabi - UAE"
- 17 **Case report: Incidental finding of a Duodenal web in a child with Trisomy 21**
Rana Hussein Wehbe, Pediatric Resident, Sheikh Khalifa Medical City, Abu Dhabi - UAE"
- 18 **Anti-Snake Venom: Not for All Snakes**
Rhea Suzanne John, Pediatric Resident-Father Muller Medical College Hospital, Mangalore, India"
- 19 **A Novel mutation in the PIGO gene causes hyperphosphatasia and mental retardation syndrome: A Case Report**
Sara Ali Belfaqeeh, Specialist Physician - Division of Metabolic Genetics, Department of Pediatrics, SKMC, Abu Dhabi - UAE
- 22 **Case report: Atypical presentation of antiphospholipid syndrome**
Shaymaa S K Ghazal, Pediatric Resident, Sheikh Khalifa Medical City, Abu Dhabi - UAE"
- 23 **A unique case of early detection of Tuberous Sclerosis in a Neonate**
Sumaiya Iqbal Iqbaluddin, Medical Resident, Medical Education - Medical Affairs, Sheikh Khalifa Medical City, Abu Dhabi - UAE

Poster Presentations

- 24 Acute Osteomyelitis in children: Clinical, biochemical and radiological characteristics and outcome - 10 years retrospective study in a tertiary hospital in Abu Dhabi, UAE**
Amina Vergara Bakro, Pediatric Resident, Sheikh Khalifa Medical City, Abu Dhabi - UAE"
- 25 Gastrointestinal Tract Manifestations of COVID19- in Children: UAE Tertiary Center Experience**
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SPEAKERS' BIOGRAPHY

Speakers' Biography



Dr. James Callahan

Professor of Clinical Pediatrics, University of Pennsylvania Perelman School of Medicine
Medical Director of Global Pediatric Education, Children's Hospital of Philadelphia, PA, USA



James M. Callahan, MD is a graduate of St. Lawrence University and the College of Medicine at SUNY Upstate Medical University. He completed his residency and served as Chief Resident Physician at Children's Hospital of Philadelphia (CHOP). After working as a pediatrician in the Adirondack Mountains he completed Fellowship in Pediatric Emergency Medicine (PEM) at CHOP.

He served as the PEM Fellowship Director at the Ohio State University College of Medicine and SUNY Upstate Medical University. He was the inaugural Director of Medical Education for the Division of Emergency Medicine at CHOP and served as an Associate Director of CHOP's Pediatric Residency Program for ten years. He is a Professor of Clinical Pediatrics at the Perelman School of Medicine, the Chair of the Academic Clinician Advisory Committee and Education Officer for the Department of Pediatrics. He is a Medical Advisor to the CHOP Patient and Family Experience Team and serves on the Physician Council of the Beryl Institute. He is the Medical Director for CHOP's Global Pediatric Education program.

He has authored numerous peer-reviewed articles and book chapters related to Pediatric Emergency Medicine. He is a member of the Committee on Pediatric Emergency Medicine of the American Academy of Pediatrics and a former member of the PEM Sub – Board representing the American Board of Pediatrics. He served on the Guidelines Workgroup that authored the Centers for Disease Control and Prevention's Guidelines on the Diagnosis and Management of Mild Traumatic Brain Injury Among Children.

His current academic and professional interests include mild traumatic brain injury (concussions) in children and adolescents, prehospital care for children, improving the experience of patients, families and providers, and professionalism among medical trainees.



Dr. Patrick Cahill

Robert M. Campbell Endowed Chair of Thoracic Insufficiency Syndrome,
Pediatric Orthopedic Spine Surgery - Division of Orthopaedics,
Children's Hospital of Philadelphia, PA, USA



I am a pediatric orthopedic spine surgeon with an interest in all aspects of pediatric spine. I conduct basic science, clinical, biomechanical, and large animal research on pediatric spine treatments, assessments, outcomes, and mechanisms. Our multi-disciplinary center of excellence in early onset scoliosis is recognized as the world leader in the field. I am the lead investigator on the first US approved trial on vertebral tethering and I was the first in the US to implant magnetic growing rods under FDA approval. Our ongoing work is creating new imaging modalities to quantify pulmonary function without the need for patient participation and without radiation. As a core member of the Harm's Study Group, the Pediatric Spine Study Group, the Pediatric Cervical Spine Study Group, and the Fox Study Group, I have a keen interest in multicenter collaboration.



Dr. Jason Anari

Assistant Professor of Orthopaedic Surgery, Pediatric Orthopaedic Surgeon
Division of Orthopaedics at Children's Hospital of Philadelphia, PA, USA



As a pediatric orthopaedic surgeon my area of expertise is in spine and chest wall deformity and pediatric trauma. At the Wyss-Campbell Center for Thoracic Insufficiency Dr. Patrick J. Cahill and I care for children with all types of spinal deformity. I work side by side with Pulmonologists to optimize respiratory function in the developing child with chest wall or spine malformations, the center specializes in managing spinal deformity in children under 10. In addition to caring for children with early onset scoliosis CHOP lead the community in innovative approaches to optimizing outcomes for adolescent idiopathic scoliosis and patients with neuromuscular scoliosis. My research interests include elucidating the biomechanics of spinal growth modulation in the child and limiting complications in pediatric spine surgery.

Speakers' Biography



Dr. Michael Levine

Lester Baker Endowed Chair & Professor Emeritus of Pediatrics & Medicine at the University of Pennsylvania
Chief Emeritus of Endocrinology & Diabetes and Director of the Center for Bone Health
Children's Hospital of Philadelphia, PA, USA



Dr. Levine is Chief Emeritus of Endocrinology and Diabetes and Director of the Center for Bone Health at The Children's Hospital of Philadelphia. Dr. Levine holds the Lester Baker Endowed Chair and is Professor Emeritus of Pediatrics and Medicine at the University of Pennsylvania.

Dr. Levine's research focuses on the genetic basis of disorders of bone and mineral metabolism. He has published over 450 manuscripts, chapters, and reviews. Dr. Levine is a former Editor of the Journal of Clinical Endocrinology and Metabolism, and has served as a member of the Board of Directors of the U.S. Pediatric Endocrine Society.

He has received numerous awards in recognition of his accomplishments as a physician scientist, including the Distinguished Endocrinology Award from the American College of Endocrinology, the Frederic C. Bartter Award from the American Society of Bone and Mineral Research, and the International Award from the European Society for Pediatric Endocrinology.



Dr. Sanjeev Swami

Associate Professor of Clinical Pediatrics, University of Pennsylvania Perelman School of Medicine,
Director of the Outpatient Infectious Diseases Clinic, Division of Infectious Diseases,
Children's Hospital of Philadelphia, PA, USA



Sanjeev K. Swami, MD, is Director of the Outpatient Infectious Diseases Clinic in the Division of Infectious Diseases at Children's Hospital of Philadelphia, and Associate Professor of Clinical Pediatrics at the University of Pennsylvania Perelman School of Medicine.

Dr. Sanjeev Swami has been recognized for his clinical and teaching excellence, receiving numerous awards, including Faculty Teacher of the Year and Senior Resident Clinician Award. In addition to his clinical roles at CHOP, Dr. Swami serves as a Quality Improvement Champion and is a member of the Department of Pediatrics Clinical Affairs Committee, and the Division of Infections Disease Fellowship Program Evaluation Committee.

Dr. Swami is a peer reviewer for Neuropediatrics, Pediatric Emergency Care, and the Journal of the Pediatric Infectious Disease Society. Dr. Swami serves as a member of the Clinical Affairs Committee of the Pediatric Infectious Diseases Society.

Education and Training:

- Medical School: MD - University of Pennsylvania, Philadelphia, PA
- Internship: Pediatrics - Children's Hospital of Philadelphia, Philadelphia, PA
- Residency: Pediatrics - Children's Hospital of Philadelphia, Philadelphia, PA (Chief Resident)
- Fellowships:
 - Infection Diseases - Children's Hospital of Philadelphia, Philadelphia, PA
 - Postdoctoral Research Fellow - Mayo Clinic, Rochester, MN
- Board Certification:
 - Pediatric Infectious Disease
 - Pediatrics

Speakers' Biography



Dr. Jeffrey Gerber

Medical Director of the Antimicrobial Stewardship Program & Associate Chief Clinical Research Officer of CHOP Research Institute, Attending physician - Division of Infectious Diseases, Children's Hospital of Philadelphia, PA, USA



Jeffrey S. Gerber, MD, PhD, is an attending physician in the Division of Infectious Diseases at Children's Hospital of Philadelphia, Medical Director of the Antimicrobial Stewardship Program, and Associate Chief Clinical Research Officer of CHOP Research Institute.

Areas of Expertise: Antimicrobial stewardship, Infections in the immunocompromised host, Epidemiology and outcomes of antimicrobial use

In addition to being Associate Professor of Pediatrics and Epidemiology at the University of Pennsylvania, Dr. Gerber holds several key leadership positions. He serves as Associate Director of the Center for Pediatric Clinical Effectiveness at CHOP and a Senior Scholar at the Penn Center for Clinical Epidemiology and Biostatistics. Dr. Gerber is a member of the American Academy of Pediatrics Committee on Infectious Diseases, for which he is Chair of the Antimicrobial Resistance and Stewardship Subcommittee.

Dr. Gerber's research focuses on the epidemiology and outcomes of antibiotic use in children, with the goal of improving clinical outcomes while limiting the emergence of antimicrobial resistance. In general, his approach has been to benchmark antimicrobial use across clinical settings to identify high-impact targets for improvement. That approach is followed by comparative effectiveness studies for clinical scenarios where practice varies, in the absence of evidence; interventions to implement and disseminate evidence-based practice, where prescribing guidelines do exist; and qualitative assessments of the clinician, practice, or institution-level factors that might drive antimicrobial prescribing.

Education and Training:

- Medical School: MD - Temple University School of Medicine, Philadelphia, PA
- Residency: Pediatrics - Children's Hospital of Philadelphia, Philadelphia, PA
- Fellowship: Infection Diseases – Children's Hospital of Philadelphia, Philadelphia, PA
- Graduate Degrees:
 - PhD - Temple University School of Medicine, Philadelphia, PA
 - MSCE in Epidemiology & Biostatistics - University of Pennsylvania School of Medicine, Philadelphia, PA
- Board Certification:
 - Pediatric Infectious Disease
 - Pediatrics



Prof. Mehul Dattani

Professor of Paediatric Endocrinology
Great Ormond Street Hospital for Children and
UCL GOS Institute of Child Health, London, UK



Mehul Dattani is Professor of Paediatric Endocrinology based at the University College London (UCL) Great Ormond Street Institute of Child Health, and Specialty Lead in Endocrinology at Great Ormond Street Hospital for Children (GOSH). He has an active clinical practice in paediatric and adolescent Endocrinology at GOSH and University College London Hospitals (UCLH). He completed a 3-year term as Chair of the British Society for Paediatric Endocrinology and Diabetes, followed by a 7 year term as Chair of the Programme Organizing Committee and member of the Council of the European Society for Paediatric Endocrinology (ESPE). He is currently the President of the European Society for Paediatric Endocrinology. He has also served as co-Chair of the Pituitary Main Thematic Group of the ENDO-ERN initiative until December 2020.

Professor Dattani has established a laboratory group investigating the molecular basis of hypothalamo-pituitary disease at UCL. He has identified novel genes implicated in hypothalamo-pituitary development in patients with congenital hypopituitarism, and has worked on understanding the molecular basis of a paediatric brain tumour called adamantinomatous craniopharyngioma. He has more than 250 publications including original articles and scholarly reviews in a number of high impact journals, as well as numerous book chapters. He sits on numerous advisory boards and editorial boards of journals. He has previously received the ESPE Henning Andersen and RCPCH Donald Paterson awards for his scientific work. He has co-authored 3 textbooks to date, including the 7th Edition of Brook's Clinical Paediatric Endocrinology.

Speakers' Biography



Dr. Sophia Varadkar

Deputy Medical Director & Consultant Paediatric Neurologist,
Great Ormond Street Hospital for Children, London, UK



Sophia is a Consultant Paediatric Neurologist and Deputy Medical Director at Great Ormond Street Hospital for Children, London, UK. She completed her undergraduate degree at Trinity College Dublin, Ireland and her postgraduate medical training in Dublin and London, UK. Her clinical work in epilepsy focuses on the Children's Epilepsy Surgery Service and she is Chair of the Steering Committee for the British Paediatric Neurology Association Paediatric Epilepsy Training Programme and is a Council Member of the International League Against Epilepsy British Branch. Originally from Dublin, she now lives in London with her husband and two children.



Dr. Louis Grandjean

Wellcome Trust Intermediate Fellow, University College London
Associate Professor & Consultant in Paediatric Infectious Diseases
Great Ormond Street Hospital, London, UK



Education and Qualifications:

1988-93 GCSE 10 A Grades

1993-95 A-level 3 A Grades 1 B

1995-2001 Medicine MBBS BSc Double Honours Imperial College

2009 MRCPCH Membership

2010 MSc Infectious Diseases Epidemiology Exam Distinction Imperial College

2010-13 PhD London School of Hygiene and Tropical Medicine

2013 Awarded Woodruff Medal LSHTM

2014 Nominated for Junior Doctor of the Year GOSH

2015 Nominated by CSP's for GOSH Junior Doctor of the Year



Dr. Patrick Whitlock

Orthopaedic Surgeon & Assoc. Prof. in the Division of Orthopaedic Surgery
Cincinnati Children's Hospital Medical Center, Ohio, USA



Dr. Whitlock is a board certified orthopaedic surgeon and associate professor in the Division of Orthopaedic Surgery at Cincinnati Children's Hospital Medical Center. He completed fellowship training at the Children's Hospital of Los Angeles in pediatric orthopaedic surgery and additional training as the Maurice E. Muller Traveling Fellow in Hip Reconstruction in Switzerland, Denmark, and Italy. He is the Co-director of the Hip Preservation Program at Cincinnati Children's where he cares for pediatric, adolescent and adult patients with complex hip pathologies using open and arthroscopic techniques. His clinical research focuses on improving outcomes for hip dysplasia and slipped capital femoral epiphysis, as well as pediatric QSVI, pediatric and adolescent trauma, and pediatric musculoskeletal infections. Dr. Whitlock is a surgeon-scientist with a dedicated laboratory conducting translational research focused on large osteochondral defects and avascular necrosis. He currently serves as a committee member of the AAOS Basic Science Committee, POSNA Research Committee, and as a reviewer for the Journal of Pediatric Orthopaedics.

Speakers' Biography



Dr. Javier Gonzalez del Rey

Prof. of Pediatrics, Assoc. Chair for Education & Co-Director of the Cincinnati Children's Pediatric Education Center, Cincinnati Children's Hospital Medical Center, Ohio, USA



Javier A. Gonzalez del Rey, M.D, MEd., is currently Professor of Pediatrics, Chair Graduate Medical Education (GME), Designated Institutional Officer for ACGME (DIO), Associate Chair for Education and Co-Director of the Cincinnati Children's Pediatric Education Center at Cincinnati Children's Hospital Medical Center. He is currently the Past - President at the Association of Pediatric Program Directors (APPD), and Past - Chair for the Executive Committee for the Section of Emergency Medicine at the American Academy of Pediatrics (AAP). He received his university and medical school education at the National University Pedro Henriquez Ureña (UNPHU) in the Dominican Republic, completed his pediatric residency at the University of Connecticut Pediatric Primary Care Program, and Fellowships training in General Academic Pediatrics and Pediatric Emergency Medicine at the Cincinnati Children's Hospital Medical Center. He is currently certified in Pediatrics and Pediatric Emergency Medicine. He completed a Master's of Medical Education and advance training in Quality Improvement Methodology (I2S2). He has won numerous teaching awards including the Cincinnati Children's Hospital Medical Center Faculty Teaching Award, the University of Cincinnati Department of Emergency Medicine Golden Apple Award, the "Parker J. Palmer Courage to Teach Award" by the Accreditation Council of Graduate Medical Education (ACGME – Regulatory agency for all training programs in the USA), the "Walter W. Tunnessen, Jr., MD Award" – by APPD for Advancing Pediatric Residency Education, the "Steve Miller Award for Excellence in Education & Mentorship" AAP – Section of Emergency Medicine, and most recently, the "Reconocimiento Profesor Educador Pediatría de Urgencias" –at Hospital Infantil Dr. Robert Reid Cabral. He was nominated and elected to the US Medical Schools Alpha Omega Alpha Chapter and Golden Humanism Society for outstanding contributions to residents and medical students education. Dr. Gonzalez del Rey's major areas of interests include resident and subspecialty medical education – PEM national and for Latin America, and improvement science methodology applied to medical education and training.



Dr. Charles Stevenson

Assoc. Prof. of Neurological Surgery & Pediatrics
Surgical Director of The Cure Starts Now Foundation Brain Tumor Center
Cincinnati Children's Hospital Medical Center, Ohio, USA



Charles Stevenson, MD, is currently Associate Professor of Neurological Surgery and Pediatrics at the Cincinnati Children's Hospital Medical Center and serves as the Surgical Director of The Cure Starts Now Foundation Brain Tumor Center at Cincinnati Children's. He joined the Division of Pediatric Neurosurgery at Cincinnati Children's in July 2010.

A graduate of the Vanderbilt University School of Medicine, Dr. Stevenson completed his neurosurgical residency at Vanderbilt University Medical Center in 2008, followed by a fellowship in neurosurgical oncology at the Vanderbilt Brain Tumor Center, and subsequently his fellowship in pediatric neurosurgery at Cincinnati Children's Hospital.

Since joining the faculty at Cincinnati Children's Hospital Medical Center, Dr. Stevenson has been instrumental in helping its Brain Tumor Center become one of the largest in the United States. He has served as an investigator for numerous multi-institutional clinical trials focused on developing innovative therapies for relapsed, malignant brain tumors. He also created and directs the Fetal Myelomeningocele Program at Cincinnati Children's, and he delivers lectures and presents techniques for intrauterine surgery both nationally and internationally.

In addition, Dr. Stevenson holds expertise in selective dorsal rhizotomy (SDR) as a surgical treatment for spasticity in children with cerebral palsy, having created the Surgical Spasticity Clinic at Cincinnati Children's Hospital. With a multidisciplinary team of specialists that includes neurosurgery, orthopaedic surgery, physical medicine & rehabilitation, as well as physical and occupational therapies, the clinic provides comprehensive surgical care for children with spasticity. Dr. Stevenson has helped establish selective dorsal rhizotomy surgical programs at multiple hospitals in the US and abroad. He is also an original neurosurgical member of the Cerebral Palsy Research Network, a North American, multicenter consortium of physicians and therapists collaborating to improve treatments and outcomes for people with cerebral palsy through high quality clinical research and quality initiatives.

Dr. Stevenson is a member of the American Society of Pediatric Neurosurgeons, AANS/CNS Section of Pediatric Neurosurgery, American College of Surgeons, and American Academy of Pediatrics. He was board certified in 2013 in neurological surgery by the American Board of Neurological Surgery, and he was certified in pediatric neurosurgery in 2014 by the American Board of Pediatric Neurological Surgery.

Speakers' Biography



Dr. Frank Biro

Prof. of Pediatrics - Division of Adolescent and Transition Medicine, Cincinnati Children's Hospital Medical Center within the University of Cincinnati Department of Pediatrics, Ohio, USA



Dr. Frank Biro is a Professor of Pediatrics in the Division of Adolescent and Transition Medicine at Cincinnati Children's Hospital Medical Center within the University of Cincinnati Department of Pediatrics.

Having spent 35 years at Cincinnati Children's Hospital Medical Center in the Division of Adolescent and Transition Medicine, Dr. Biro has held many roles in the division including staff physician, director of research, director of clinical services, and division director.

In the early 1990s, he developed the Combined Internal Medicine-Pediatrics Residency at the University of Cincinnati. He has written more than 250 scientific publications and has been a principal investigator in the Breast Cancer and the Environment Research Programs since 2001.

His research most recently has investigated the impact of the environment on physical maturation and development as well as provided a better understanding of how these factors relate to later risk of breast cancer.

Dr. Biro has also maintained an active clinical practice in the Teen Health Center and on the inpatient floor. He is regarded as the "Dr. House" of Cincinnati Children's Hospital by being the physician whom other physicians go to with their medical conundrums and complex cases. He has been cited continuously since 1995 in the Best Doctors in America and in 2017 received the Clinical Care Achievement Award at Cincinnati Children's.



Dr. Rajesh Krishnamurthy

Clinical Professor of Radiology, Ohio State University
Radiologist-In-Chief, William E. Shiels Chair of Radiology
Nationwide Children's Hospital, Columbus, Ohio, USA

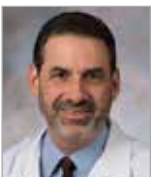


Rajesh Krishnamurthy, MD, is Chief of the Department of Radiology at Nationwide Children's Hospital, William E. Shiels, II, DO Endowed Chair in Radiology and the director of the Pediatric Advanced Imaging Resource (PAIR), which aims to integrate the advanced image generation and analysis needs across the clinical and research enterprise.

He previously served as a Radiologist and Director of Research for the Department of Radiology at Texas Children's Hospital, where he also served as Director of Cardiovascular Imaging. He also was Professor of both Radiology and Pediatrics at Baylor College of Medicine. Prior to Texas Children's, he was a Chief Fellow of Radiology at Boston Children's, and also served in staff radiologist positions at both Boston Children's and Brigham and Women's Hospital. Dr. Krishnamurthy has served on numerous editorial board and national committees, including serving as Chairman of the Pediatric Scientific Program Committee of the Radiological Society of North America from 2012 to 2015.

Dr. Krishnamurthy lectures nationally and internationally on pediatric cardiovascular and body MRI, and pediatric CT. He is fellowship trained in nuclear medicine, pediatric radiology and pediatric cardiovascular imaging.

His interests include adaptation of MR sequences for free-breathing acquisition in sedated children, low radiation dose volumetric CT for pediatric applications, assessment of end-organ injury to the cardiovascular system from systemic diseases in children, contrast enhanced MR angiography, 3D image post-processing, and assessment of the value of imaging in pediatric disease.



Dr. Richard E. Kirschner

Department Chief, Plastic & Reconstructive Surgery
Nationwide Children's Hospital, Columbus, Ohio, USA



Dr. Kirschner serves as the Robert and Edgar T. Wolfe Foundation Endowed Chair in Plastic and Reconstructive Surgery, Chief of the Department of Plastic and Reconstructive Surgery and Director of the Cleft Lip and Palate Center at Nationwide Children's Hospital in Columbus, Ohio and as Professor of Surgery and Pediatrics at The Ohio State University.

Dr. Kirschner has educated physicians, surgeons, and other healthcare professionals from across the US and around the world and has cared for underserved children in Central and South America. He has lectured across the globe on the principles of cleft lip and palate surgery and multidisciplinary team care. He has served as President of the American Cleft Palate-Craniofacial Association and is the co-editor of Comprehensive Cleft Care. He is President and Co-Founder of Magical Moments Foundation, a nonprofit organization that works to renew a sense of hope, joy, and empowerment in children with facial differences.

Speakers' Biography



Dr. Lynda Villagomez

Pediatric Hematology/Oncology/ BMT Fellow at Nationwide Children's Hospital, Columbus, Ohio, USA



Dr. Lynda Villagomez is a pediatric Hematology/Oncology/BMT Fellow at Nationwide Children's Hospital (NCH) and a translational researcher interested in discovering novel treatments for hematologic malignancies affecting adolescents and young adults (AYA), a vulnerable population with poorer outcomes due to complex factors such as access to care, long-term side effects, toxicities, and chemotherapy compliance. Dr. Villagomez is currently investigating the driver activity of protein arginine methyltransferase enzyme 5 (PRMT5), an epigenetic modifier, in the pathogenesis of T-cell acute lymphoblastic leukemia/lymphoma with a focus on novel therapeutics and the tumor microenvironment.

She is the recipient of the American Society of Hematology (ASH) Minority Hematology Fellow Award career development grant, under the mentorship of Dr. Robert Baiocchi at the Ohio State University's Comprehensive Cancer Center. Dr. Villagomez will be joining the NCH faculty this summer as a postdoctoral research instructor to continue her translational investigations.



Dr. Marshall Summar

Chief, Division of Genetics & Metabolism
Children's National Hospital, Washington, D.C., USA



Dr. Summar joined Children's National in 2010 where he built and leads the Rare Disease Institute. He is best known for his work in developing registries and treatment standards for rare diseases. His laboratory work currently focuses on filling gaps in knowledge and testing for biochemical and dysmorphic rare disorders. He has been listed with Best Doctor's in America since 2004. He is the past National Organization for Rare Disorders Board Chairman and helps develop NORD programs around natural history studies, undiagnosed disorders, and clinical centers of excellence in rare disease.



Dr. Marc Levitt

Chief, Division of Colorectal & Pelvic Reconstruction
Children's National Hospital, Washington, D.C., USA



Marc Levitt has focused his career on enhancing the care of children with colorectal and pelvic reconstructive needs. He has cared for children from all 50 of the United States and 76 countries and has performed more than 15,000 pediatric colorectal procedures. He has written five textbooks and has authored over 300 scientific articles in this subject area. His work extends to educating students, surgeons, other medical colleagues, and nurses, as well as developing integrated centers throughout the world to ensure that all children have access to quality colorectal care. Dr. Levitt received his undergraduate degree from the University of Pennsylvania, his medical degree from the Albert Einstein College of Medicine, and his surgical training at Mount Sinai Medical Center in New York and the Children's Hospital of Buffalo. He serves as the Chief of Colorectal and Pelvic Reconstruction at Children's National Hospital, and Professor of Surgery, George Washington University School of Medicine, in Washington DC, USA.

Speakers' Biography



Dr. Gerard Martin

Medical Director Global Services C.R. Beyda, Professor of Cardiology
Children's National Hospital, Washington, D.C., USA



Dr. Martin, a pediatric cardiologist has been in practice at Children's National Hospital since 1986. Dr. Martin was promoted to Professor of Pediatrics, with tenure, at the George Washington University School of Medicine in 1995 and was the Chief of Cardiology from 1997 to 2009 and Senior Vice President for the Center for Heart Lung and Kidney Disease from 1999 to 2015. He founded the Children's National Heart Institute in 2004. He was named the C. Richard Beyda Professor of Cardiology in 2007.

Dr. Martin was educated at Syracuse University and the State University of New York, Upstate School of Medicine. After a residency at Brown University and the Rhode Island Hospital, he received his training in pediatric cardiology at the Cardiovascular Research Institute at the University of California, San Francisco. He has published over 150 peer reviewed manuscripts, book chapters and invited publications and has presented abstracts at over 125 meetings. Dr. Martin is an invited lecturer who has traveled to over 200 meetings, hospitals and universities within the USA as well as around the world. Dr. Martin is an advocate for congenital heart disease efforts nationally and internationally. He played integral roles in the development of CCHD Screening and the Sub-Board of Adult Congenital Heart Disease in the U.S.A. Additionally, Dr. Martin has been a volunteer on medical missions to developing countries. He has served in a consultant role within the United States as well as in South America, Asia and the Middle East.



Dr. Yves d'Udekem

Division Chief, Cardiac Surgery | Co-Director,
Children's National Heart Institute
Children's National Hospital, Washington, D.C., USA



Yves d'Udekem, M.D., Ph.D., joined Children's National Hospital as Division Chief of Cardiac Surgery and Co-Director of the Children's National Heart Institute in September 2020.

Dr. d'Udekem is Belgian born with Canadian and Australian citizenship and received his early training in Belgium and Toronto. He worked as a cardiac surgeon in Belgium, operating on both adults and children with congenital heart disease. Dr. d'Udekem then worked with internationally recognized heart surgeon Professor Marc de Laval and others in London to train in congenital heart surgery at the Great Ormond Street Hospital for Sick Children.

From there, he was recruited to The Royal Children's Hospital in Melbourne, Australia, an institution that has been a leader in advancing the field of congenital heart disease. In Melbourne, Dr. d'Udekem built an outstanding reputation for clinical excellence and an exceptional academic career. He has over 300 publications and is highly cited and respected. Dr. d'Udekem obtained more than 7 million dollars in grant funding in the past five years as he created and became a recognized leader for the highly touted Fontan Registry.

He is committed to working together with our multidisciplinary team. As well as providing excellent patient and family experience throughout a patient's course from outpatient visits to inpatient stay, to the operating room and back again.



Dr. Rohit Kohli

Prof. of Pediatrics (Clinical Scholar) Keck School of Medicine,
University of Southern California, USA, Division Chief,
Gastroenterology, Hepatology & Nutrition, Children's Hospital Los Angeles, CA, USA



I am a Pediatric Hepatologist by training and currently responsible for the Division of Pediatric Gastroenterology, Hepatology, and Nutrition at Children's Hospital Los Angeles and an Endowed Professor of Pediatrics at the Keck School of Medicine at USC.

My research work is focused on obesity-related fatty liver disease (NASH) and the role of bile acid signaling in weight loss surgeries driven improvement of obesity and its associated morbidities, such as NASH.

My clinical work is focused on liver disease and liver transplantation in children.

Speakers' Biography



Dr. Aaron Kelly

Professor, Department of Pediatrics
Minnesota American Legion & Auxiliary Chair in Children's Health, Co-Director
Center for Pediatric Obesity Medicine, University of Minnesota Medical School, USA



Aaron S. Kelly, PhD, is a professor of pediatrics, holds the Minnesota American Legion and Auxiliary Chair in Children's Health, and is co-director of the Center for Pediatric Obesity Medicine at the University of Minnesota Medical School. He has approximately 20 years of experience conducting clinical trials for the treatment of pediatric obesity and has published over 100 peer-reviewed papers on related topics. Dr. Kelly's NIH-funded research program focuses on treatments targeting the underlying biology of obesity, such as pharmacotherapy and metabolic/bariatric surgery, as supplements to lifestyle modification therapy with the goal of enhancing clinical outcomes in youth struggling with the disease. A distinct yet closely aligned research priority in his portfolio involves identifying and characterizing predictors of treatment response aimed at advancing the discipline of precision obesity medicine to improve care delivery for children and adolescents with obesity. Dr. Kelly is actively involved in numerous initiatives related to pediatric obesity treatment in the United States and internationally, has held various leadership positions in the Obesity Society and American Heart Association, and is a Fellow of both organizations.



Dr. Kristin Moffitt

Asst. Prof. of Pediatrics, Harvard Medical School
Assoc. Physician in Infectious Diseases
Boston Children's Hospital, MA, USA



Kristin Moffitt, MD is an Associate Physician in Infectious Diseases at Boston Children's Hospital and an Assistant Professor of Pediatrics at Harvard Medical School. She graduated from Wellesley College before obtaining her medical degree from University of Vermont. After completing her pediatrics residency at Hasbro Children's Hospital of Brown Medical School and fellowship in infectious diseases at Boston Children's Hospital, she joined the faculty of the Division of Infectious Diseases at BCH in 2010. With support from the NIH, the Pediatric Infectious Diseases Society and the Charles Hood Foundation, her research has focused on how bacteria cause disease and how effective immune responses develop in humans. Dr. Moffitt has also been on the forefront of Boston Children's Hospital's response to the SARS-CoV-2 pandemic, and leads the Emerging Pathogen and Epidemic Response Cluster of Clinical Research Excellence at BCH.



Dr. Jennifer Blumenthal

Instructor in Pediatric Critical Care Medicine & Pediatric Infectious Diseases,
Harvard Medical School, Boston Children's Hospital, MA, USA



Dr. Blumenthal is currently on the medical staff at Boston Children's Hospital in the division of Critical Care Medicine and the Division of Infectious Diseases within the Department of Anesthesiology, Critical Care and Pain medicine and Division of Pediatrics, respectively. She spent time as a research scholar with the Centers for Disease Control and Prevention and the Department of Public Health studying Infection Prevention and control and Epidemiology. Her clinical and research focus includes antimicrobial stewardship in the pediatric ICU and quality improvement practices surrounding infection prevention and control in acute care. She sits on the national Society for Healthcare Epidemiology of America subcommittee on Antimicrobial stewardship in addition to regional targeted advancement groups focused on hospital associated infection.

Speakers' Biography



Dr. Leslie Lehmann

Director, Clinical Stem Cell Transplantation Program
Medical Director, International Hematology/Oncology/BMT
Boston Children's Hospital, MA, USA



Dr. Lehmann attended Harvard University for her undergraduate degree and Duke University for her medical degree. She completed her fellowship training in pediatric hematology/oncology in 1996 at the Boston Children's Hospital/Dana Farber Cancer Institute combined program. Since then she has focused on stem cell transplantation and became the Clinical Director of the Boston program in 2005. We now perform over 140 transplants annually and are one of the few pediatric programs with outcomes that "Exceed Expectations" as assessed by the CIBMTR. The overall focus of her research is on reducing the complications associated with transplantation including resource utilization (hospital readmissions/transfusion use), treatment of veno-occlusive disease and infection prevention. She is co-director of the pediatric Global Health Initiative and has worked with Partners in Health and Dana Farber to establish a cancer center in rural Rwanda. She is the director of the International program at her institution for pediatric hematology/oncology /transplant and has worked closely on program development, educational initiatives and collaborative care models with partner hospitals in Cairo, Kuwait and China.



Dr. Walid Kaplan

Chair - Scientific Committee
Chairman of the Department of Pediatrics
Tawam Hospital, Al Ain, UAE



Dr. Kaplan is a Consultant Pediatric Endocrinologist and the Chairman of the Department of Pediatrics at Tawam Hospital, Al Ain, UAE.

Dr. Kaplan has received his MD from Damascus University, Syria, and completed his pediatric residency at Michigan State University, and pediatric endocrinology sub-specialty training at Baylor College of Medicine, Texas Children's Hospital, Houston, Texas. He is certified by the American Board of Pediatrics in Pediatric Endocrinology.

Dr. Kaplan has practiced in the US for many years, he is currently involved in clinical and teaching responsibilities at Tawam Hospital and the School of Medicine, UAE University. His research interests include diabetes and Ramadan, growth disorders, and calcium and bone mineralization disorders. He has published widely in these areas and given oral and poster presentations at many regional and international meetings.

In addition to the clinical and academic activities, Dr. Kaplan has a long-standing administrative experience as he assumed the responsibilities of Chief Medical Officer, and Chief Quality Officer as well as chairing hospital-wide committees at Tawam Hospital.

Dr. Kaplan has received several awards throughout his career locally and in the USA



Dr. Eihab Al Khasawneh

Consultant Pediatric Nephrologist
Sheikh Khalifa Medical City, Abu Dhabi, UAE



Graduated from Jordan University of Science and Technology in 2002.

Completed Pediatric Residency at University of Medicine & Dentistry of New Jersey in 2009 and Pediatric Nephrology Fellowship at University of Florida in 2012. Appointed as assistant professor at West Virginia University.

American Board Certified in Pediatrics and Pediatric Nephrology. Has several publications in international journals.

Joined SKMC as consultant pediatric nephrologist in August 2015.

Speakers' Biography



Dr. Khulood Walid Khawaja

Consultant, Pediatric Rheumatology
 Director of Adult Rheumatology Fellowship Program
 Sheikh Shakhbout Medical City, Abu Dhabi, UAE



MBCHB Leicester University UK 1995

MRCP and FRCPCH London UK 2000

CCST Paediatric Rheumatology 2005 (three centre training: Newcastle upon Tyne, Leeds Teaching Hospitals and Great Ormond Street Hospital)

Director of Adult rheumatology fellowship program SSMC, December 2020 to date

PRINTO NCC Director SSMC (National Coordinating Centre UAE for Pediatric Rheumatology International Trial Organisation)

Adjunct Clinical Associate Professor (Gulf Medical School)

SSMC Research Ethics Committee Deputy Chair 2019 - to date

Previous responsibilities:

- Local Principal Investigator of JSLE (2012-2014)
- Local Principal Investigator of Extended biologics and etanercept registry NIHR portfolio studies (2011-2014)
- Member of Arthritis research UK/MCRN Pediatric Rheumatology clinical study group (2013-2014)
- Member of JIA Topic Specific Group of UK/MCRN clinical study group
- Reviewer for Archives of Disease in Childhood Rheumatology related manuscripts (2012-2014)
- Pediatric Rheumatology European Society Juvenile Dermatomyositis working group secretary (2011-2013)

More than fifteen years' experience as a consultant. Expertise in Juvenile arthritis, autoimmune conditions & auto inflammation. Moved from the UK to Al-Mafraq now Sheikh Shakhbout Medical City JV with Mayo Clinic in Abu Dhabi in August 2014. Provide comprehensive assessment and management of rheumatic conditions in children and adolescents. Provide expert opinion to cases in pediatric rheumatology. Involved in teaching and research at local, regional and international level. Invited speaker at local and international level. Published good number of articles and wrote a book chapter in pediatric rheumatology.



Dr. Alan Smit

Consultant Anesthesiology
 Sheikh Khalifa Medical City, Abu Dhabi, UAE



Consultant Physician in the Department of Anaesthesia at Sheikh Khalifa Medical City where I have been working for several years.

Born and raised in South Africa. I trained at the University of the Witwatersrand Medical School in Johannesburg and worked at CH Baragwaneth Hospital in Soweto, Johannesburg for over 20 years.

Interested in quality improvement and safe anaesthesia practice.

Thoroughly enjoy paediatric anaesthesia and its challenges.

Speakers' Biography



Dr. Durdana Iram

Consultant, Pediatric Pulmonology
Tawam Hospital, Al Ain, UAE



I did MBBS from Khyber Medical College, Pakistan. Then did my general pediatric residency in Nationwide Children's Hospital Columbus Ohio, followed by fellowship in Pediatric Pulmonology in the same hospital. I am American board certified in General pediatrics since 1997 and in pediatric pulmonology since 2000. I then joined Nationwide hospital Columbus, Ohio as an attending Pediatric Pulmonologist until I moved to Tawam Hospital where I have been working as a pediatric pulmonologist since 2002



Dr. Guido Hein Huib Mannaerts

Chair of Surgery
Tawam Hospital, Al Ain, UAE



Dr. Mannaerts, a double Dutch board certified Gastro-intestinal as well as Oncology surgeon, is the Chair of Surgery Department at Tawam Hospital in Al Ain and an Adjunct Associate Professor at the UAEU.

Besides his Bariatric and Surgical oncology practice at Tawam Hospital he is also having a Bariatric clinic at Sh. Shakhbout Medical Center/ Mayo clinic in Abu Dhabi.

In his previous assignment as a consultant surgeon at the St. Franciscus Gasthuis teaching hospital in Rotterdam (The Netherlands), he also was the Head of Surgery and the lead in the high volume bariatric unit (2002-2014). Moreover, he is internationally known from the Enhanced Recovery After Surgery (ERAS) bariatric courses that he organised there for bariatric surgeons from all over the world.

His total experience of 10000 minimal invasive bariatric procedures, including the whole spectrum of bariatric revisional procedures, makes him one of the most experienced bariatric surgeons in the Gulf region. Besides that he has a vast experience in oncological surgery including over 1000 performed laparoscopic colorectal procedures, laparoscopic gastric cancer resections and adrenalectomies.

Furthermore, he has a strong scientific background and as such is the principle investigator in multiple Dutch government registered randomised controlled trials, leading to over 70 Pubmed registered publications. Furthermore, he has obtained a PhD on the multimodal treatment of locally advanced rectal and locally recurrent rectal cancer (ISBN 90-367-1418-4).

He had his surgical training including a surgical oncological fellowship at the renowned Catharina Hospital in Eindhoven (The Netherlands), where he obtained extensive experience in the complex surgical treatment of locally advanced and locally recurrent rectal cancers.

Speakers' Biography



Dr. Abdulla Aljneibi

Consultant
Pediatric Endocrinology Mediclinic
Abu Dhabi, UAE



Dr. Abdulla Aljneibi is a UAE national consultant paediatric endocrinologist who graduated from the Royal College of Surgeons in Ireland and then completed his general paediatric residency and paediatric endocrinology fellowship at the Hospital for Sick Children in Toronto, Canada. He holds a certificate from the American Board of Pediatrics and a clinical fellowship in Paediatric Endocrinology from the University of Toronto.

He has a 12 years' experience in paediatric endocrinology. He worked previously in the governmental sectors including Zayed Military Hospital and the Mushrif Children Specialty Centre (SEHA). His last post was at Burjeel Hospital.

Dr. Aljneibi also holds a Master degree in both Public Health and Healthcare Administration. He has been part of multiple governmental initiatives in the past; including chairing the childhood diabetes taskforce at the Health Authority of Abu Dhabi where he contributed to creating the childhood diabetes guideline. He also chaired the Childhood Obesity Committee at the Abu Dhabi Educational council and also was an active member of the Abu Dhabi Childhood obesity prevention taskforce.

Besides his clinical experience, Dr. Aljneibi is active in the field of research with publications in many international medical journals. He is a co-investigator in the UAE Healthy Future Study that is led by NYU Abu Dhabi, which is the biggest cohort study seeking to determine the risk factors of cardiovascular diseases among the UAE nationals.



Dr. Bilal Mohammad

Consultant Physician Pediatrics Medical Affairs
Sheikh Khalifa Medical City, Abu Dhabi, UAE



Dr. Bilal Mohammad is a Consultant Pediatrician at SKMC, Abu Dhabi.

After graduating from Pakistan, he went to USA and finished his residency in Pediatrics in 1995 followed by fellowship in Ambulatory Pediatrics.

He is American Board certified and recertified in Pediatrics.

He moved to Abu Dhabi in 2001 and worked at Zayed Military hospital from 2001 until he joined SKMC in Aug 2017.

He headed the Pediatric section of a busy Zayed Military Primary Care Center from Nov 2008 to June 2010.

His main interest is in implementing the evidence-based guidelines.



Dr. Mohamad Miqdady

Division Chief, Ped. GI, Hepatology & Nutrition Division, Program Director
Pediatric Gastroenterology Fellowship Training program
Sheikh Khalifa Medical City, Abu Dhabi, UAE



Professor Mohamad Miqdady is American Board certified in Pediatric Gastroenterology, Hepatology and Nutrition.

- Division Chief, Ped. GI, Hepatology & Nutrition Division at Sheikh Khalifa Medical City in UAE.
- Clinical Professor, Dept. of Pediatrics, College of Medicine & Health Sciences, Khalifa University, UAE.
- Program Director, Pediatric Gastroenterology Fellowship Training program, SKMC, UAE.
- Adjunct Staff at Cleveland Clinic, Ohio USA.
- Expert member of the FISPUGHAN Council (Federation of International Societies of Pediatric Gastroenterology, Hepatology, and Nutrition); Malnutrition/Obesity Expert team.

Professor Miqdady completed his Fellowship in Pediatric Gastroenterology at Baylor College of Medicine and Texas Children's Hospital in Houston, TX, USA. He held the position of Assistant Professor at Jordan University of Science and Technology in Jordan for six years prior joining SKMC.

Main research interests include nutritional disorders, feeding difficulties, picky eating, obesity, procedural sedation, allergic GI disorders and celiac disease. He has 20 publications in peer reviewed journals. On the Editorial Board of few journals including Gastroenterology & Hepatology. Reviewer for uptodate.com.

Speakers' Biography



Dr. Nawal Al Kaabi

Chief Medical Officer, CMO Office,
Medical Affairs, Sheikh Khalifa Medical City
Abu Dhabi, UAE



Dr. Nawal Al Kaabi is Deputy Chief Medical Officer at SKMC, a position appointed in November 2015. She has been Division Chief of Pediatric Infectious Disease at SKMC since 2007, Paediatric residency Program Director April 2010 to Nov 2015, Chair of education and DIO, Education Institute from 2014 – March 2016, SEHA infection Control Committee Chair since September 2012 to date and National immunization Technical Advisory Group chair from 2012- 2016.

Dr. Al Kaabi has worked in hospitals both locally and internationally, with her last position immediately prior to joining SKMC being as Pediatric Consultant at the Zayed Military Hospital, Abu Dhabi.

Dr. Al Kaabi completed her medical education at the University of UAE's Faculty of Medicine & Health Sciences, Al Ain, UAE in 1996, where she graduated with a MBSS. She then took up a position as a pediatric house officer for a year in the Zayed Military Hospital before relocating to Canada in 1998 to work at the prestigious University of Ottawa's Children's Hospital of Eastern Ontario. During residency she appointed as a chief resident and became certified as a Fellow in Pediatrics through the Royal College of Physicians in Canada in 2002 and certified again in Pediatric Infectious Disease in 2004. Additionally she completed an Infection Control Fellowship at the Children's Hospital of Eastern Ontario, University of Ottawa in Canada. She is also American Board Certified (2001).

In 2014- 2015 she joined HARVARD MEDICAL SCHOOL'S, GLOBAL CLINICAL SCHOLARS RESEARCH TRAINING (GCSRT) PROGRAM. And she graduated with distinguished performance and Ranked as one of the top 3 among all international participants in capstone project.

Throughout her career caring for and treating children in Canada and the UAE, Dr. Al Kaabi has been in demand to become a committee member and to lecture on medical topics relating to her specialized field. Her high level of teaching has earned her numerous plaudits, including Abu Dhabi Medical Distention award, Category: Education (the most prestigious medical award in Abu Dhabi).

She has been involved in the organization of many conferences and seminars in the field of pediatrics, infectious diseases and infection control nationally and internationally.

Dr. Nawal is also member of the scientific advisory committee, Shaikh Zayed Institute, Children's National Medical Center, Washington DC, USA.

Her main interests are Immunization, Multidrug resistance organisms, infection control and Medical education



Dr. Hafis Ibrahim Ponnambath

Consultant Neonatologist
Corniche Hospital, Abu Dhabi, UAE



Dr. Hafis Ibrahim is a consultant neonatologist working at the Corniche Hospital in Abu Dhabi. He graduated from India and underwent post graduate training in paediatrics from the prestigious Post Graduate Institute of Medical Education and Research, Chandigarh. He moved to the UK in 2001 and subspecialised in neonatology, obtaining his CCT in 2009. Subsequently he worked as a consultant neonatologist at the Liverpool Women's Hospital which was then the largest neonatal unit in Europe. His main interests other than clinical neonatology includes medical research, medication safety, quality improvement and infection control. He has led many quality improvement projects during his career. He is also a keen educator being a faculty member of the neonatal fellowship programme and set up the first neonatal simulation programme for residents in Abu Dhabi. He has multiple publications in peer reviewed journals and has presented at national and international meetings. He was an integral part of the team leading the COVID response at Corniche hospital and has recently published the experience of managing infants born to mothers with SARS-COV2

Speakers' Biography



Dr. Mohammed Issa

Consultant Pediatrics Emergency Medicine
Tawam Hospital, Al Ain, UAE



Qualifications:

- MRCPCH Membership of Royal College of Pediatric and Child Health (UK) 2000.
- CABP Arab Board of Medical Specialization in Pediatrics 1996.
- DCH higher Diploma in Pediatrics Baghdad University -IRAQ 1995.



Dr. Mohammad Fahed Abdullah

Consultant, Pediatric Hematologist / Oncologist
Sheikh Khalifa Medical City, Abu Dhabi, UAE



Mohammad Fahed Abdullah, Consultant, pediatric Hematologist/Oncologist at Sheikh Khalifa Medical City, Abu Dhabi. MD Diploma from Faculty of Medicine, University of Aleppo, Syria. Training in Pediatrics and Pediatric Hematology/Oncology at State University of New York, USA. American board certified in pediatrics and Pediatric Hematology/Oncology. Member of American Society of Hematology and European Hematology Association. Main interest Hemostasis and Acute Leukemia in children



Dr. Eman Alshamsi

Consultant Pediatric Hematologist & Oncologist
Tawam Hospital, Al Ain, UAE



Dr. Eman Taryam AlShamsi is a currently serving as consultant paediatric heme/Oncologist in Tawam hospital., the Chair of pediatric tumor board in Tawam and presenting UAE in Neuro-Oncology MDT with Sickkids. Started cancer predisposition service and registry in Tawam. She is also serving as visitor hematologist in MOHAP north emirates hospitals. She hosted SIOP Asia 2019 conference in Abu Dhabi as Congress president.

She graduated in 2002 from the faculty of medicine & health sciences from the United Arab Emirates University. Following graduation she trained and practiced in Tawam hospital, where she acquired the Arab Board diploma of medical specialization in paediatrics, in addition to passing RCPCH certification. She has been trained & obtained a Diploma in clinical research - affiliated by Vienna school of clinical research. Later on she Completed fellowship program at Sickkids hospital, Toronto, Canada which included full training in Paediatric Clinical haematology Oncology /Bone Marrow transplant and thrombosis for 3 years. She also has attended administrative fellowship program in MD - Anderson, Texas, USA. Dr.Alshamsi has been part of several of on-going collaborative research projects at Tawam hospital & Zayed University.

Speakers' Biography



Dr. Maya Mallat Yassin

Group Director of Quality
SEHA, Abu Dhabi, UAE



Dr. Maya Mallat Yassin is the Group Quality Director at Abu Dhabi Health Services Company (SEHA), the largest healthcare network in the UAE, operating 12 hospitals and more than 40 ambulatory and primary healthcare centres, with a combined total of more than 18,000 professional staff.

Dr. Mallat Yassin is in charge of developing, overseeing and coordinating a corporate quality program inclusive of risk management, continuous quality improvement, patient safety, clinical audit, patient experience, complainants' management and other activities in order to support SEHA's endeavour to provide world-class healthcare services.

She has a Doctorate in Business Administration from Grenoble Ecole de Management in France, focused on patient safety and risk management. She also holds a Masters' Degree in Genetics and Cellular Biology, as well as a Masters' Degree in Industrial Technology.

Dr. Mallat Yassin has over 15 years' experience in quality improvement, risk management and patient safety within international healthcare organizations. She is a results driven healthcare services researcher with strong analytical skills and a track record in leading and working with multidisciplinary and multicultural teams to develop and implement effective healthcare strategies with demonstrated outcomes. She is a well honed speaker who has had the opportunity to lecture at multiple local and international conferences



Dr. Mahjabeen Ilyas Khan

Director of Revenue Development Management
Finance Department, Sheikh Khalifa Medical City
Abu Dhabi, UAE



Innovative professions educated and practices as a physician, certified in insurance, coding and documentation improvement, trainer for ICD 10 CM-PCS coding system. Managing a team of >250 staff, she is having an extensive experience in revenue cycle management, medical insurance, system and process automation, health information management, denial management, coding and documentation improvement with more than 15 years of progressive, diverse and passionately-engaged experience in the health care industry.



Dr. Fayeza Saif Alyafei

Chief Quality Director
Sheikh Khalifa Medical City
Abu Dhabi, UAE



Dr. Fayeza Saif Al Yafei is a consultant family physician and the Chief Quality Officer in Sheikh Khalifa Medical City (SKMC), one of the Healthcare facilities managed by Abu Dhabi Health Services Company (SEHA).

She received her MBBS Degree from the College of Medicine and Health Sciences, UAE University and then completed her Arab Board Residency program in Family and Community Medicine in 2005 from Abu Dhabi, followed by a fellowship in Early Childhood and Development from Yale University. She also holds an Executive Masters degree in Healthcare Administration from Zayed University and is certified by the American College of Medical Quality.

Dr. Fayeza has more than 15 years' experience in Clinical & administrative work she is the recipient of many prestigious awards. Besides her active role in clinical Quality and Patient Safety, she is also a faculty and teaches in Sheikh Khalifa Medical City Family Medicine Residency program, and Zayed Military Hospital Family Medicine Residency Program.

Speakers' Biography



Dr. Hala Abu Zaid

Chairman, CCM
Tawam Hospital, Al Ain, UAE



A versatile physician with extensive experience in managing clinical and administrative settings, and licensed to provide medical care in the United Kingdom, Sudan, KSA and the Department of Health (DOH) in the United Arab Emirates. A critical care consultant with a passion for saving lives by enhancing the profile of the specialty department and endorsing the implementation of evidence-based medicine to facilitate the enhancement of quality of obstetric care, emergency care and critical care. Demonstrated proficiency in leading multidisciplinary teams through proper communication and by incorporating values of integrity, transparency and fairness, thereby improving health services across Sudan.

Experienced in successfully handling patients at their worst clinical states, and reducing mortality by ensuring the availability of adequate resources, infrastructure, proper care, and by facilitating early detection of disease and risk management.

A resourceful professional who has advocated for patients' rights of wellbeing, women's rights for obstetric care as well as nursing staff rights. Currently working in the city of Al Ain, UAE in the field of Critical care, traumatology and oncological critical care.



Dr. Amani Osman Hassan

Consultant Child and Adolescent, Psychiatrist
Behavioral Science Pavilion, Sheikh Khalifa Medical City,
Abu Dhabi, UAE



MBBS Khartoum University, FRCPsych London, MSc Medical Law, Cardiff University, DPM Psychological Medicine, Cardiff University and MSc in Clinical Neuropsychiatry, Birmingham University).

Dr. Amani, a consultant and the head of department of Child Psychiatry at SKMC. She had worked as a consultant in child and learning Disability Psychiatry since 2010 till 2020 in the UK.

She has interest and experience in research and Teaching. She was the Training Programme Director (2015 to 2018) of Child and adolescent Psychiatry in Wales Deanery. She was the chair of Faculty of child Psychiatry Royal College of Psychiatrists in Wales from February 2018 to October 2019.



Dr. Mohamed Salaheldin Riad

Consultant Medical Genetics, Program Coordinator of National Preventive
Genetic Programs in the UAE, Ministry of Health & Prevention, UAE
Pure Health, UAE



Qualifications: M.B.,B.Ch, M.Sc Medical Human Genetics, M.Sc Pediatrics ,MD Medical Human Genetics (Thesis: Neonatal genetic screening of inborn error of metabolism).

Title: Consultant of Medical Genetics: Diagnostic center for genetics and neonatal screening, Abu Dhabi, United Arab Emirates.

Organization: MOHAP from JAN 1998 till JAN 2020 2-Purehealth from FEB 2020 till NOW

Current Position:

- Program Coordinator of National Preventive Genetic Programs in UAE:
 - National Neonatal Screening Program .
 - National Congenital abnormalities and hereditary diseases registry.
- Head of Cytogenetic , Molecular Cytogenetic (FISH) and Microarray labs:
- Clinical Geneticist Diagnosis and counseling of different genetic disorders.

Actively participate and Speaker in many of National and International conferences and workshops:

e.g.: Haemoglobinopathies Screening In MENA region & UAE country report ,ISNS-MENA meeting in Limassol, Cyprus, March 8-11,2020

Research And Publications:

e.g.: Expanding the comprehensive national neonatal screening programme in the United Arab Emirates from 1995 to 2011. Eastern Mediterranean Health Journal, Vol. 20 No. 1, 2014.

Speakers' Biography



Dr. Fares Chedid

Chief of Neonatology, Kanad Hospital
Al Ain, Abu Dhabi, UAE



Dr. Fares Chedid is Consultant Neonatologist and Chief of Department at Oasis Hospital. He studied Medicine and Pediatrics at the Catholic University of Leuven in Belgium and Specialized in Neonatology at the Catholic University of Leuven and Flinders University in South Australia. Dr. Chedid worked at internationally accredited teaching hospitals in Belgium, Kingdom of Saudi Arabia and UAE.

Dr. Chedid published more than seventy manuscripts in peer-reviewed medical journals and is a recipient of multiple awards in education and research. His main interests are assisted ventilation, perinatology, biostatistics, evidence based medicine and neonatal infectious diseases.



Dr. Hiba Shendi

Consultant Immunologist
Asst. Prof., Tawam Hospital, Al Ain, UAE



Dr. Hiba Shendi is Consultant Immunologist in Tawam Hospital, Al Ain, UAE. She completed a Clinical MD in Pediatrics and Child Health and obtained MRCPCH and MSc in Immunology of Infectious Diseases, London School of Hygiene and Tropical Medicine, in 2004. She joined the UK training program in Clinical Immunology in 2006, obtained Fellowship of Royal College of Pathologist in Immunology CCT in Immunology in 2012. She worked as Consultant Immunologist/Allergist, Royal Victoria Hospital in Belfast, UK, until December 2015.

She has various publications and wide experience in the management of primary immunodeficiency and allergic conditions.

Abstract Oral Presenters Biography



Dr. Ajia Syed

Research Associate
Sheikh Khalifa Medical City
Abu Dhabi, UAE



My name is Ajia Syed and I graduated from the Aga Khan University, Karachi, Pakistan in November 2019. I started working as a research associate at the Pediatric cardiothoracic surgery department, at Sheikh Khalifa Medical City, in January 2020. My responsibilities primarily included data extraction from the electronic medical record, data analysis, and manuscript writing. My area of interest is outcomes-based clinical research to improve patient care and safety. I plan to pursue my general surgery residency in the United States of America.



Dr. Amina Vergara Bakro

Pediatric Resident
Sheikh Khalifa Medical City
Abu Dhabi, UAE



Dr. Amina Vergara Bakro is a keen pediatrician in training at Sheikh Khalifa Medical City in Abu Dhabi. She graduated with a Bachelor of Medicine, Bachelor of Surgery (M.B.B.S) from the University of Sharjah. She then completed an internship year at UERM Memorial Medical Center in Quezon City, Philippines

Her interest includes clinical research, teaching and academics. In 2020 she was selected as Academic Co- Chief resident by her residency program. In her free time, Dr. Amina enjoys adventure sports, reading fiction and spending time with friends and family. She lives by the quote Dream, Believe and Achieve!



Dr. Almontaser Bella Mohammed Hussein

Specialist Physician, Pediatrics, Madinat Zayed Hospital
Al Dhafra Hospitals, Abu Dhabi, UAE



Dr. Almontaser M Hussein is a Pediatrician at Madinat Zayed Hospital – ADH – SEHA. He is a licensed Pediatrician since 2003. He specialized in Pediatric Nephrology at Children University Hospital, Asyut, South Valley - Egypt after an MD (PhD) degree and a 3-year fellowship at the Hospital for Children and Adolescent health- Heidelberg, Germany in 2009. He published many original articles and abstracts in high impact medical journals and is author of over 15 peer-reviewed publications. His areas of interest extend to reviewing research articles; he reviewed many research articles as volunteer reviewer in reputable Journals. His published research work included Pediatric Nephrology/Urology, Endocrinology, Neonatology, Hematology and Genetics.



Dr. Shahd Farajallah

Pediatric Resident
Sheikh Khalifa Medical City
Abu Dhabi, UAE



Shahd Farajallah is currently a third year pediatric resident at Sheikh Khalifa Medical City. She earned her M.B.B.S degree from Gulf Medical University in 2017 with honors. She has a special interest in research and quality improvement projects with multiple oral and posters presentations in national and international conferences. Shahd has a great passion for the pediatrics field and enjoys being a part of SKMC family. She is interested in the academic education field and is currently a volunteer for student's education in her institute. She is a volunteer in Red Crescent societies since 2014 and is involved with multiple health awareness campaigns around the country.

Abstract Oral Presenters Biography



Dr. Nafea Alyasi

Pediatric Gastroenterology Fellow
Sheikh Khalifa Medical City, Abu Dhabi, UAE



Nafea Al Yasi studied medicine in UAE University, and completed his pediatrics residency training in Tawam Hospital. Currently he is a senior Pediatric Gastroenterology Fellow in SKMC.



Dr. Mai Fathi Soliman

Pediatric Resident
Sheikh Shakhbout Medical City
Abu Dhabi, UAE



Dr. Mai Soliman is currently working as pediatric resident in Sheikh Shakhout medical city. Finished four-year training of residency and in the process for obtaining her Arab board certificate in pediatric. She obtained her medical degree at University of Sharjah and then finished her internship program for one year in Al- ain hospital. Her area of interest is in genetic and metabolic and planning to further pursuing her career in this field. She participated in many conferences and I have published many Posters in many conferences.



Dr. Maha Khalil Abass

Pediatric Resident
Sheikh Shakhbout Medical City
Abu Dhabi, UAE



Maha Khalil Abbas is a second year pediatrics resident at Sheikh Shakhbout Medical city.

Maha received her Bachelor of medicine from Baghdad university and then joined the internship program at Sheikh Khalifa medical city. Maha joined Mafraq pediatrics residency program in 2019 in which she is currently a second year resident.

Her interest in audits and QIP started during her year as an intern when she worked with the general pediatrics department on a documentation project.

During her first year in pediatrics residency, her first abstract about "Burden of Influenza disease in hospitalized pediatrics patients in Mafraq hospital 2020 "was presented orally in 14th SEHA International Conference 2020.

Maha has a special interest in enhancing system based practice and participated in various project including creating an order set for the SEHA power chart for managing acute bronchiolitis with an aim to reduce medical error and improve patient care and is currently working on a project to revise the pediatrics vital sign range in the "Salamtak" power chart.

SPEAKERS' ABSTRACTS

Day1, Thursday | 18 March, 2021

Speakers' Abstracts

Day1, Thursday | 18 March, 2021

SESSION 1

10:15-10:40

Acute Kidney Injury



Dr. Eihab Al Khasawneh

Consultant Pediatric Nephrologist
Sheikh Khalifa Medical City, Abu Dhabi, UAE



- Definition
- Staging/Classification
- Epidemiology
- Etiology
- Diagnosis
- Burden and Impact
- Risk Factors and Prevention
- Treatment

10:40-11:05

Pediatric Rheumatology



Dr. Khulood Walid Khawaja

Consultant, Pediatric Rheumatology
Director of Adult Rheumatology Fellowship Program
Sheikh Shakhboub Medical City, Abu Dhabi, UAE



Antiphospholipid Syndrome and catastrophic APS in children can be very difficult to diagnose or simply missed if not thought of. In this talk, the presenter will give multiple examples of how such patients can present clinically and when to consider this diagnosis which can be lifesaving. Other possible clinical presentations and how to diagnose. Will also discuss treatment options in such cases and general management.

11:05-11:30

Management of Acute Pain in Children



Dr. Alan Smit

Consultant Anesthesiology
Sheikh Khalifa Medical City, Abu Dhabi, UAE



Learning Objectives:

- Brief overview of current status of pain management in the young population
- Discourse on possible therapeutic options

Speakers' Abstracts

Day1, Thursday | 18 March, 2021

SESSION 1

11:30-11:55

NIV on the Medical Ward: Options and Indications (WS)



Dr. Durdana Iram

Consultant, Pediatric Pulmonology
Tawam Hospital, Al Ain, UAE



Learning Objectives:

- Discuss the different types of Noninvasive ventilation (NIV)
- Discuss of applications of the various types of NIV in different diseases
- Discuss the pros and cons of NIV

SYMPOSIUM

12:10-12:40

Role of Sensor based technologies in Management of Type1 DM Patients & New Advancements in Flash Glucose Monitoring Technology



Dr. Walid Kaplan

Chair - Scientific Committee
Chairman of the Department of Pediatrics
Tawam Hospital, Al Ain, UAE



Frequent glucose monitoring is one of the fundamental components of a safe and effective diabetes management. Studies have shown that there is a positive correlation between the frequency of selfmonitoring blood glucose (SMBG) and the drop in HbA1c. However, the majority of patients with type 1 diabetes mellitus (T1DM) fail to meet the minimum requirements of daily SMBG in spite of the improvement of the currently available traditional glucometers.

Continuous glucose monitoring (CGM) represents a more advanced and convenient way of monitoring glucose that provide a direct and remote access to a much more consistent and meaningful information. CGM has been found to help improving diabetes control while reducing the risk of hypoglycaemia. Freestyle Libre® represents one of the most convenient options for glucose monitoring in diabetes. The recent improvement of the second generation (Freestyle Libre-2®) has added important features that improve the safety, convenience, and usability of this device.

This lecture will highlight the role of SMBG in T1DM, and elaborate of the specifications of Freestyle Libre-2® and its role in managing T1DM in children

Speakers' Abstracts

Day1, Thursday | 18 March, 2021

SESSION 2: Diet & weight

13:20-13:45

Non-surgical Treatment for Obesity in Adolescents (Unmet needs in Adolescents with Obesity)

**Dr. Aaron Kelly**

Professor, Department of Pediatrics
Minnesota American Legion & Auxiliary Chair in Children's Health, Co-Director
Center for Pediatric Obesity Medicine, University of Minnesota Medical School, USA



Learning Objectives:

- Describe the limitations of lifestyle therapy as a singular treatment
- Provide a rationale for the use of pharmacotherapy
- Review FDA-approved medications to treat adolescent obesity
- Characterize the pediatric anti-obesity medication pipeline: looking to the future

13:45-14:10

Surgical Treatment for Obesity in Adolescents

**Dr. Guido Hein Huib Mannaerts**

Chair of Surgery
Tawam Hospital, Al Ain, UAE



Learning Objectives: Bariatric surgical techniques and results

Methods: Literature review and own results of bariatrics in the paediatric age group

Results: Bariatrics leads to 55-75% Excess Weight Loss (15-25% Total body weight loss) and 50-85% of diabetes resolution (variety depending on technique used) Bariatrics has a very low complication rate in skilled hands

Conclusion: Bariatric surgery is the only therapy that leads to a substantial & sustainable weight loss in morbidly obese patients and subsequent resolution of obesity related co-morbidities and significantly increases the life span

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Speakers' Abstracts

Day1, Thursday | 18 March, 2021

SESSION 2: Diet & weight

14:20-14:45 Lipid screening: Why, when, and how to manage

**Dr. Abdulla Aljneibi**

Consultant
Pediatric Endocrinology Mediclinic
Abu Dhabi, UAE



Learning Objective: To Discuss primary and secondary prevention of atherosclerotic cardiovascular disease (ASCVD) through lipid screening, determining treatment benefit and risk, and providing appropriate treatment.

14:45-15:10 Effects of Sports and Energy Drinks and Artificial Sweeteners on Children

**Dr. Bilal Mohammad**

Consultant Physician Pediatrics Medical Affairs
Sheikh Khalifa Medical City, Abu Dhabi, UAE



Learning Objectives:

- Know the differences between "sports" and "energy" drinks
- Summarize the benefits and risks of these drinks
- List the indications when these drinks may be used
- Elaborate advantages and disadvantages of sweeteners

15:10-15:35 Treatment of non-pathological underweight and FTT

**Dr. Mohamad Miqdady**

Division Chief, Ped. GI, Hepatology & Nutrition Division, Program Director
Pediatric Gastroenterology Fellowship Training program
Sheikh Khalifa Medical City, Abu Dhabi, UAE



Outlines:

- Failure to thrive is slow physical development in a baby or child. It's caused by a baby or child not having enough nutrition.
- A child with FTT is at risk for problems such as short height, behavior problems, and developmental delays.
- FTT has many possible causes. A baby or child may not be getting enough nutrients and calories. Or a baby or child may take in enough food, but not be able to absorb enough nutrients and calories.
- A baby or child with an ongoing (chronic) health condition may also need more calories and nutrients than normal.
- In some cases, a family may not understand what a baby needs. In severe cases, neglect or abuse may lead to FTT if food is kept from a baby on purpose.
- FTT can be prevented by seeking early help with a child's nutritional needs.

Speakers' Abstracts

Day1, Thursday | 18 March, 2021

SESSION 3: COVID-19

16:10-16:35 COVID-19 in children: Year In Review



Dr. Kristin Moffitt

Asst. Prof. of Pediatrics, Harvard Medical School
Assoc. Physician in Infectious Diseases
Boston Children's Hospital, MA, USA



In this session, we will review the epidemiology and biology of SARS-CoV-2 infection in children, including clinical presentation and risk factors for severe infection. An overview of treatments for COVID-19 infection in children will be provided. The clinical presentation and management of multisystem inflammatory syndrome in children (MIS-C) will also be reviewed. Data on transmission in children will be summarized, and we will discuss implications for these findings on school re-openings. The rationale for and studies of vaccination in children will also be discussed.

16:35-17:00 COVID antibody responses and PIMS-TS (MISC)



Dr. Louis Grandjean

Wellcome Trust Intermediate Fellow, University College London
Associate Professor & Consultant in Paediatric Infectious Diseases
Great Ormond Street Hospital, London, UK



Outline:

- UK response to COVID
- Our experience of the COVID Epidemic in the UK at GOSH
- Transmission of SARS-CoV-2
- COVID antibodies
- COVID staff at GOSH

17:00-17:25 Epidemiology, morbidity and treatment of COVID-19 in UAE



Dr. Nawal Al Kaabi

Chief Medical Officer, CMO Office,
Medical Affairs, Sheikh Khalifa Medical City
Abu Dhabi, UAE



Speakers' Abstracts

Day1, Thursday | 18 March, 2021

SESSION 3: COVID-19

17:25-17:50

Perinatal Outcomes in COVID 19

**Dr. Hafis Ibrahim Ponnambath**

Consultant Neonatologist
Corniche Hospital, Abu Dhabi, UAE



Learning Objectives:

- To describe the epidemiology of SARS-COV2 in the pregnant population cared for at Corniche Hospital
- To describe the outcomes of infants born to mothers infected with SARS-COV2 infection
- To describe the management of infants born to mothers with SARS-COV2 infection

Methods: Design | Prospective observational study. Setting A large tertiary maternal and neonatal care centre based in the UAE. Participants | Infants born to mothers diagnosed to have COVID-19 at the time of delivery, born between 1 April and 15 June 2020.

Main outcome measures | Rate of transmission of SARS-CoV2 from mother to infant (vertical or horizontal) while rooming in and breast feeding in hospital and post discharge and associated morbidity and mortality in the neonatal period.

Results: 73 infants were born to mothers with COVID-19 at the time of delivery. Two infants tested positive for SARS-CoV2 after birth-one had respiratory symptoms related to other causes and the other infant remained well. 57 of mother-infant dyads who were well enough, roomed in while in hospital and all were breast fed. All surviving infants were followed up by telephone at 2 weeks and 4 weeks (or from the patient record review if still on the Neonatal Intensive Care Unit. Majority of the discharged infants were still rooming in with mothers (95% at 2weeks, 99% at 4 weeks) and still breast fed (99% at 2 weeks, 99% at 4 weeks). None of the infants developed any significant health issues or developed symptoms attributable to SARS-CoV2.

Conclusions: The risk of mother-to-infant transmission of SARS-CoV2, vertically or horizontally, in the perinatal period is very low. Breast feeding and rooming in can be practised safely with adequate infection control precautions with negligible clinical risk to the infant

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Speakers' Abstracts

Day1, Thursday | 18 March, 2021

WORKSHOPS DAY 1

18:15-18:40

(Lecture 1) The Dysmorphic Patient: When and how to investigate**Dr. Marshall Summar**

Chief, Division of Genetics & Metabolism
Children's National Hospital, Washington, D.C., USA



Learning Objectives:

- The practitioner should learn the difference between dysmorphism and malformation
- The practitioner should have a system to approach a patient presenting with dysmorphic features.
- The practitioner should have a grasp of the strengths and weaknesses of various testing methods.

Abstract: With the rapid expansion in molecular genetic diagnostics and imaging, the ability to arrive at a firm diagnosis for a patient with dysmorphic features (or developmental delays) has never been greater. This lecture will review the elements of the dysmorphic exam and discuss elements that are genetic or environmental in nature. A broad approach outline will be discussed that is suitable for the general practitioner of pediatrics. The methods available to the pediatrician and the specialist will be discussed for relative utility and yield.

Methods: The use of clinical examples and current statistical data.

Results: Incorporation into the practice of the attendees.

Conclusions: We are hopeful that this lecture will provide a basis for pediatricians to comfortably work with and deal with the dysmorphic patient.

18:40-19:05

(Lecture 2) Fatty Liver Disease**Dr. Rohit Kohli**

Prof. of Pediatrics (Clinical Scholar) Keck School of Medicine,
University of Southern California, USA, Division Chief,
Gastroenterology, Hepatology & Nutrition, Children's Hospital Los Angeles, CA, USA



Learning Objectives:

- Practitioners should be able to identify data regarding impact of obesity and its related gastroenterological co-morbidities including fatty liver disease in children and adolescents.
- Practitioners should be able to discuss interventions for obesity and NASH.
- Practitioners should be able to explain indications and complications of common surgical weight loss procedures in use for adolescents with obesity.

References:

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Speakers' Abstracts

Day1, Thursday | 18 March, 2021

WORKSHOPS DAY 1

19:15-20:15

(Workshop 3) The Best diagnostic Tools in Pediatrics ED



Dr. Mohammed Issa

Consultant Pediatrics Emergency Medicine
Tawam Hospital, Al Ain, UAE



Learning Objectives:

- Discuss some of Pediatrics Emergency Scenarios that are life threatening
- Mention briefly the DDx
- Explain how to utilize clinical, radiological, lab tests & procedures to manage these cases considering :
 1. Safety
 2. Cost Effectiveness
 3. Rapidity of decision

19:15-20:15

(Workshop 4) Jeopardy in the Pediatric Emergency Room: An Imaging Case-based Review



Dr. Rajesh Krishnamurthy

Clinical Professor of Radiology, Ohio State University
Radiologist-In-Chief, William E. Shiels Chair of Radiology
Nationwide Children's Hospital, Columbus, Ohio, USA



This fast-paced review of actionable findings in pediatric emergency imaging will provide an overview of acute pediatric diagnoses, best practices, and occult findings not to be missed. The objectives are the following:

- Recognize difficult but essential radiographic findings in pediatric emergency radiology.
- Understand the test characteristics of common ED radiographic studies.
- Review appropriateness of common imaging approaches in the ED.

SPEAKERS' ABSTRACTS

Day2, Friday | 19 March, 2021

Speakers' Abstracts

Day2, Friday | 19 March, 2021

SESSION 4

10:05-10:30

Anemia in Children

**Dr. Mohammad Fahed Abdullah**

Consultant, Pediatric Hematologist / Oncologist
 Sheikh Khalifa Medical City, Abu Dhabi, UAE



Anemia is a reduction in either red blood cell volume, or the concentration of hemoglobin in blood. Anemia is one of the most common health problems worldwide with prevalence at 25% mostly in low development countries. Anemia in children can be classified according to the etiology:

- Impaired Red Cell Formation
- Blood Loss
- Hemolytic Anemia

Anemia also can be classified based on the size of RBC (MCV) as microcytic, normocytic, or macrocytic. The causes of microcytic anemia:

- Deficiency of Iron
- Deficiency of heme (inherited sideroblastic anemia)
- Deficiency in globin (thalassemia syndromes)
- Rare inherited anemias due to mutations of proteins involved in iron metabolism/regulation.

Diagnosis of anemia depends on detailed medical history including family history and thorough physical exam followed by screening laboratory testing followed by more specific tests.

Iron deficiency is the world's most common micronutrient deficiency. Infants and young children with iron deficiency are more likely to have attention deficits, reduced motor coordination, and language difficulties and may be irreversible.

Iron deficiency may have impact on adaptive immunity and response to childhood vaccination. The diagnosis of iron deficiency anemia is based on dietary history, risk factors and laboratory investigations:

- Low Ferritin, low serum iron, low transferrin saturation and high TIBC.
- Hepcidin will be low in IDA.

Hepcidin is hormone synthesized in the liver and plays key-role in iron metabolism and distribution.

Hepcidin binds to ferroportin and induces its internalization and degradation. By this mechanism, the interaction of hepcidin with ferroportin regulates the flow of iron into plasma, and thereby regulates the distribution of iron in the body.

Patients with iron-refractory iron-deficiency anemia have iron deficiency despite adequate or increased iron intake and are even partially resistant to parenteral iron. A major cause of this disorder is a genetic lesion in the gene encoding the membrane protease matriptase-2, also called TMPRSS-6.

Speakers' Abstracts

Day2, Friday | 19 March, 2021

SESSION 4

10:30-10:55

Update on the Diagnosis and Management of Growth Hormone Deficiency

**Prof. Mehul Dattani**

Professor of Paediatric Endocrinology
Great Ormond Street Hospital for Children and
UCL GOS Institute of Child Health, London, UK



One of the commonest referrals made to Paediatric Endocrine clinics is for short stature, with a view to excluding treatable causes such as growth hormone deficiency (GHD). The causes of GHD include both congenital and acquired pituitary disorders. The presentation is highly variable, including early neonatal hypoglycaemia and later growth failure with/without associated clinical features including signs/symptoms of other hormonal deficiencies, and involvement of other structures such as the eyes, ears and midline of the brain. The diagnosis of GH deficiency (GHD) in childhood is a multistep process involving clinical history and examination with detailed auxology, biochemical testing, and pituitary imaging, with an increasing contribution from genetics in patients with congenital GHD. Careful history and examination with meticulous auxological data are critical components of the initial evaluation in clinic. Thereafter, further investigations are required to exclude other causes of short stature, eg Turner syndrome in girls, coeliac disease etc, and to establish the diagnosis of GHD. Testing for GHD is fraught with difficulty, and includes the measurement of basal growth factors such as insulin-like growth factor-1 (IGF-1) and insulin-like growth factor binding protein-3 (IGFBP3), as well as other pituitary hormones. GH stimulation tests may be indicated in the short child who is growing slowly and who has low growth factor concentrations. There is, however, no consensus with respect to a diagnostic gold standard test for GHD, and this is usually based upon a combination of clinical, biochemical, and neuroradiological data. The use of MRI often provides the final piece of the jigsaw with respect to diagnosis, as it can be abnormal in a significant proportion of patients. Recent research has led to the identification of several genetic mutations that are implicated in the etiology of isolated GHD (IGHD). Mutations in known genes such as those encoding GH (GH1), GHRH receptor (GHRHR), or transcription factors involved in pituitary development, are nevertheless identified in a relatively small percentage of patients suggesting the involvement of other, yet unidentified, factors. Genome-wide association studies point toward an increasing number of genes involved in the control of growth, but their role in the aetiology of IGHD remains unknown. Once the diagnosis is made, GHD is easily treatable with daily recombinant human growth hormone (rhGH) injections. In the past few years, improvement in the design of growth hormone pen devices has led to improved adherence in the paediatric and adolescent cohort with GHD. Moreover, the advent of long-acting growth hormone preparations holds significant promise for the treatment of these patients in the future. Careful evaluation of growth, together with measurement of biomarkers such as IGF-1 in the first few months after commencing treatment, is essential in order to optimize treatment and to make any necessary dose adjustments. Despite the many years of research in the area of GHD, there are still controversies on the etiology, diagnosis, and management of IGHD in children. Recent data suggest that childhood IGHD may have a wider impact on the health and neurodevelopment of children, but it is yet unknown to what extent treatment with recombinant human GH can reverse this effect. Finally, the safety of recombinant human GH is currently the subject of much debate and research, and it is clear that long-term controlled studies are needed to clarify the consequences of childhood IGHD and the long-term safety of its treatment.

Speakers' Abstracts

Day2, Friday | 19 March, 2021

SESSION 4

10:55-11:20 Abnormal coagulation screening

**Dr. Eman Alshamsi**

Consultant Paediatric Hematologist & Oncologist
Tawam Hospital, Al Ain, UAE



Outlines:

- Overview of hemostasis
 - Primary hemostasis
 - Secondary hemostasis
- Step Approach
- Case scenarios
- Take home messages
 - Narrow your differential by taking details history, good physical examination and screening lab.
 - If you have high suspicion and your initial screen is negative; please refer to hematologist.
 - Diagnosis can change with time; please re assess your diagnosis if new symptoms, new physical exam or refractory to treatment.

11:20-11:45 Update on Recent Advances in Management of the Epilepsies in Childhood

**Dr. Sophia Varadkar**

Deputy Medical Director & Consultant Paediatric Neurologist,
Great Ormond Street Hospital for Children, London, UK



Outlines:

- Newer drug therapies
- Advances in epilepsy surgery
- Advances in neurostimulation for epilepsy

Abstract: Epilepsy is a disease of the brain characterised by seizures. It is common, with an estimated prevalence of active epilepsy of 5-10/1000. Paediatric epilepsy offers particular challenges in terms of diagnosis, evaluation and management. The treatment aim is seizure freedom. Anti-epileptic drugs are the main-stay of treatment. Seizure freedom is achieved with the first anti-epileptic drug (AED) in 58-70% of children and with the second drug in a further 10-20%. Pharmacoresistant epilepsy is defined as failure of adequate trials of two tolerated appropriately chosen and used AED schedules (monotherapy or combination) to achieve seizure freedom. When the first two anti-epileptic drugs have failed, the chances that the next drugs will achieve seizure freedom are dramatically decreased. Pharmacoresistance should prompt a review of the diagnosis, the seizure type(s) and epileptic syndrome (is the right drug being used for the seizure type and syndrome) and compliance. There should be early consideration of other therapeutic options in pharmacoresistant epilepsies. This lecture will focus on an approach to and the treatment options in pharmacoresistant epilepsies.

Speakers' Abstracts

Day2, Friday | 19 March, 2021

SESSION-5: Abstract Presentation

13:15-13:25

The Effectiveness of Laparoscopic-assisted Percutaneous Endoscopic Gastrostomy in Pediatric Patients: A Single-center Retrospective 9-year Cohort Study**Dr. Ajia Syed**

Research Associate
Sheikh Khalifa Medical City
Abu Dhabi, UAE



Learning Objectives:

- List the associated major complications of LAG and LAPEG
- Compare duration and length of hospital stay of both the procedures
- Evaluate whether addition of endoscopy to LAG provides any benefit in children

Methods: This is a retrospective cohort study conducted at Sheikh Khalifa Medical City. Children under 18 years undergoing LAPEG and LAG were included and followed up for at least 1 year.

Results: 181 patients were studied (LAG = 92, LAPEG = 89). Demographics including gender, age, and weight was similar in both groups. Mean age for LAG was 2.8 years and for LAPEG was 2.5 years. Mean weight was 10.3kg and 10.6 kg in the LAG and the LAPEG group, respectively. Patients with LAG and LAPEG had comparable risk factors including previous abdominal surgery (37% vs 33%), cardiac disease (21% vs 21%), ICU admission (40% vs 34%) respectively. There was no statistical difference between the two groups regarding successful completion, conversion rate, early tube dislodgement (< 6 weeks), peritoneal leak, adjacent bowel injury, need for re-operation under general anesthesia after gastrostomy placement, and wound infection (< 4 weeks). Mean procedural duration of LAG was 39.1 minutes and 30.5 minutes in LAPEG (p value <0.001). On reviewing the elective cases separately (LAG=54, LAPEG=54), the mean length of stay following LAG was 7.5 days while the length of stay for LAPEG was 5.2 days (p value <0.001).

Conclusions: Previous studies have demonstrated that LAPEG is a safe, effective, and relatively simple procedure [1]. In our study LAPEG did not demonstrate to give any advantage in complication rate. However, it significantly reduced the procedure time and hospital stay. In our experience, LAPEG may offer a reduced overall procedure cost and a safe alternative for complicated patients.

Speakers' Abstracts

Day2, Friday | 19 March, 2021

SESSION-5: Abstract Presentation

13:25-13:35

Celiac Disease: Determining the prevalence, clinical manifestations (intestinal and extra-intestinal), nutritional status, associated co-morbidities, among the pediatric population in the Emirate of Abu Dhabi, UAE



Dr. Amina Vergara Bakro

Pediatric Resident
Sheikh Khalifa Medical City
Abu Dhabi, UAE



Background: Celiac disease (CD) is a chronic autoimmune enteropathy to gluten (a group of proteins in wheat, rye, and barley) causing gastrointestinal villous atrophy. CD present with a broad spectrum of clinical presentations: intestinal "Classical CD" characterized by diarrhea, constipation, abdominal distention, and failure to thrive "Non-Classical CD" such as short stature, resistant iron deficiency anemia, hypothyroidism, changes in bone mineral density. CD has a reported prevalence of 0.5–1% of the general population in the west, higher predisposition among first degree relative (10-15%), type-1 diabetes mellitus (12%) autoimmune thyroiditis (15%). CD diagnosis is based on recognizing (1) clinical symptoms (2) antibody positivity (anti-tTG- IgA, Anti-EMA-IgA), (3) intestinal biopsy, (4) Clinical response to Gluten Free Diet (GFD). The most important treatment aspect of confirmed CD is lifelong strict adherence to GFD to prevent complications.

Aim: To describe the clinical features, biochemical, histopathological findings, associated co-morbidities and outcomes of celiac disease in our pediatric population at SKMC a tertiary hospital in Abu Dhabi, UAE to standardized approach and compare these against published data of pediatric cohorts worldwide

Methodology A 5- year retrospective chart review of all pediatric patients diagnosed with Celiac Disease at our center from January 2015 to January 2020.

Result: A total of 200 patients were diagnosed with Celiac Disease. Mean age was 8 years (range of 1 to 16 years), with female predominance (56.9%) and 70% being UAE national. Classical symptom was present 43.7% of those most common presenting symptoms among them were abdominal pain (34%), weight loss (16%), and diarrhea (10%). Whereas 56.3 % had either non-classical presentations or belonged to high risk groups for celiac disease such as those with type-1 diabetes (33%) autoimmune thyroiditis (8%), Down syndrome (3%) and first degree relative (27.8%), short stature (15%). Celiac antibodies were found in 196 (98%) tTG immunoglobulin A (IgA) 90%, tTG immunoglobulin G 65%, Endoscopy was utilized to confirm the diagnosis in majority of our cohort, Histological evidence of CD was found in 92% , 68% were classed as definite CD (Marsh 3). All children had significant improvement in symptoms and growth on gluten restriction where BMI was compared at diagnosis and at follow up 6 months later on Gluten Free Diet (GFD) showed statistical improvement with p value of < 0.0001

Conclusion: To our knowledge this is the first study on Celiac Disease in our region, results are similar with regional and International data with regards to gender, age, clinical & biochemical characteristics with noted higher prevalence in high-risk groups. Our study highlights with proper compliance to GFD, children usually catch up their growth potential, improvement of symptoms and other complications associated with the disease

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Speakers' Abstracts

Day2, Friday | 19 March, 2021

SESSION-5: Abstract Presentation

13:35-13:45

Predictors of outcome and length of stay in Bronchiolitis

**Dr. Almontaser Bella Mohammed Hussein**

Specialist Physician, Pediatrics, Madinat Zayed Hospital
Al Dhafra Hospitals, Abu Dhabi, UAE



Learning Objectives

- Identify predictors for increased length of stay in bronchiolitis
- Identify predictors for the need for escalated care.
- contrast our observed practice with the published data

Methods: We reviewed the health records of children admitted 1/1/2018 to 31/12/2019. Predictors evaluated are age, gender, family history of asthma, documented prematurity, fever, hypoxemia, comorbidities, respiratory syncytial virus (RSV) and medications (salbutamol, steroids and antibiotics). Logistic regression tested the independent variables. Relative risk and 95% CI calculated.

Results: Bronchiolitis comprised 8.65% of Pediatric admissions and 2.8% of hospital admissions. The mean age is 8.28±6.1 months, 83% infants, 39.2% girls, 15.2% delivered preterm, 25.1% had family history of asthma, 84.9% had chest radiographs (21.3% showed significant findings), RSV-antigen detected in 22.5%, Oxygen therapy instituted in 32.7%, 3.9% needed escalated care. Salbutamol, antibiotics, and steroids used in 82.5%, 38.9%, and 22.3% respectively. The mean LOS was 3.6±1.6 days. Independent predictors for LOS were family history of asthma (P=0.03, OR=1.8, CI 1.4-2.9), hypoxemia (P<0.001, OR=3, CI 1.8-4.9), presence of comorbidity (P=0.012, OR=2.3, CI 1.6-5.3), and abnormal radiographs (P<0.002, OR=2.7, CI 1.6-4.6). Prematurity (P<0.001, OR 8.8, CI 2.7-28.4), RSV bronchiolitis (P<0.002, OR=3.02, CI=1.5-6.03) and hypoxemia (P<0.042 OR=4.6, CI 1.1-14.9) are independent risks for escalating care. Age, wheezy chest, bronchodilators, steroids and antibiotics use, neither associated with LOS nor predicted escalated care.

Discussion: We identified prematurity as independent predictor for increased LOS and ICU admissions, with 5.7-fold risk for receiving escalated care (CI 2.1-15.5). These findings are consistent with previous reports^{1,2}. Corroborating evidence for RSV testing, and chest radiographs in infants with bronchiolitis is lacking³. While detection of RSV might decrease antibiotic prescription⁴, chest x-ray films might increase antibiotic use and LOS than to improve the clinical outcomes⁵. In our study, 38.2% received antibiotics in the RSV group compared to 41.2% in the non-RSV (P>0.05) and 84.9% had chest radiograph, compared to 11% in Korea⁶ and 52% in Kuwait⁷.

Conclusions: Bronchiolitis in preterm infants may prompt low threshold for admission and escalated care. Early respiratory support and evidence based treatments might help achieving optimal LOS.

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- Kader AA, et al, Imaging In Acute Bronchiolitis: Evaluation of The Current Practice In a Kuwaiti Governmental Hospital and Its Possible Impact on Hospitalization. *The open respiratory medicine Journal* . DOI: 10.2174/1874306401812010075, 2018, 12, 75-80

Speakers' Abstracts

Day2, Friday | 19 March, 2021

SESSION-5: Abstract Presentation

13:45-13:55

**Blood cultures contamination & resource utilization in pediatrics hospital:
A one-year retrospective review at a single tertiary care center**

Dr. Shahd Farajallah
Pediatric Resident
Sheikh Khalifa Medical City
Abu Dhabi, UAE



Background: Blood cultures are an important tool to help tailor effective management for patients with suspected septicemia and/or severe infections. Frequent contaminated samples increase laboratory workload and may cause unwarranted anxiety, prolonged hospital stay and/or antibiotic use. While target rates for contamination have been set at 3-4%, actual rates seem to vary widely between institutions, from as little as 0.6% to over 6%.

Objective: The aim of this study is to measure the rate of blood culture contamination amongst the pediatric age group in a single tertiary care center in Abu Dhabi, help identify potential predictors and evaluate the impact of contaminated blood cultures on patients and the health care system.

Methods: A cross-sectional, retrospective review of Electronic Medical Records (EMR) of children between the ages of 0-16 years, who had a positive peripheral blood culture at SKMC collected in ED, wards and PICU from Jan 2020 to Dec 2020. Central blood cultures were excluded from the study.

Results: A total of 1430 peripheral blood cultures were identified, 179 were positive of which 117 (65%) were contaminated. The overall contamination rate was 8.2%. The most common age group was between 1-5 years with equal gender distribution. The highest rate of contamination 96(82%, P=0.001) was from samples collected in the emergency department (ED) by ED nurses, followed by samples from the medical and surgical pediatric wards 13(11.11%) collected by phlebotomists. The lowest contamination rate was among PICU patients 8(6.8%). 76% of all contaminated samples were gram positive cocci in clusters (P=0.001), among which *Staphylococcus epidermidis*, *Staphylococcus hominis* and *Micrococcus luteus* were most prevalent. Gram-positive cocci in chains and gram negative bacteria (eg: *Roseomonas* species) accounted for 14.5% and 8% respectively. The mean interval from blood collection and first positivity in contaminated samples was 1.3 ± 0.7 days.

High grade fever > 39 and higher CRP mean were found to be more associated with true bacteremia rather than contamination (P=0.002, 0.001). Of all the contaminated samples, 80(68%) patients had their blood cultures repeated and they were all negative. Of the 30 patients who were called back by ED after positive preliminary cultures, 16.2% were admitted for IV antibiotics, while 9.4% were discharged from ED after repeating blood cultures. Among the admitted patients, 24(20.5%) had antibiotic change to cover the preliminary identified contaminant group, 21(17.9%) had prolonged course of initial treatment and 39(33.3%) required prolonged stay for additional 3 days in average until repeated culture results are confirmed.

Conclusion: Our blood culture contamination study is in keeping with international data in regards to age distribution, causative pathogens and location of sampling as a main contributing factor to contamination. Accurate blood culture results are essential for providing safe, timely and effective care for patients with serious infections. At the same time, it is vitally important to collect the blood culture sample by proper technique to avoid contamination. To decrease contamination rates, appropriate training of personnel who collect blood samples and hospital protocols for blood draw for culture should be provided.

Speakers' Abstracts

Day2, Friday | 19 March, 2021

SESSION-5: Abstract Presentation

13:55-14:05

A 14-fold Increase in Multiple Magnet Ingestion in Children in Emirate of Abu Dhabi: Multi center Tertiary Center experience: We need Legislative Action!**Dr. Nafea Alyasi**

Pediatric Gastroenterology Fellow
 Sheikh Khalifa Medical City, Abu Dhabi, UAE



Introduction: Multiple magnet (MM) ingestions have increasingly become notorious as one of the ingested foreign bodies (FB) associated with the most morbidity and mortality. Most commonly these are associated with bowel necrosis and perforation, consequently making it one of the most serious types of FB ingestions

Aim: In this study, we aim to identify the prevalence of ingestion of multiple magnets in our pediatric cohort in the UAE, and to identify the associated complications and health burden.

Method: This is a retrospective descriptive study. All children below 18 years attending the two tertiary specialist pediatric Gastroenterology centers in Abu Dhabi Emirate, were recruited. Patients were recruited from SKMC and Tawam from the period of January 2016 until December 2019. Electronic medical records were accessed and patients were identified by using both ICD-9 and ICD-10 codes.

Results: Over the study period, a total of 68 cases of suspected magnet ingestion were identified in both hospitals, of which 63 cases had an x ray confirmation of single or multiple magnets. The majority of ingested magnets were single (40/63) and the rest were multiple (23/63)

Out of 23 patients with confirmed multiple magnet ingestions, the majority were admitted to the hospital (20/23), two patients were discharged home from the emergency room (ER) with home observation, while one patient left the ER against medical advice.

Most of the admitted children required surgical removal of the multiple magnets (14/23). Endoscopic removal of multiple magnets was successful in 3 patients and unsuccessful in 2 patients. One patient required no surgical/endoscopic intervention as the magnets had clumped together and moved through the gastrointestinal tract without any morbidity.

The total number of x-rays in the patients with MM ingestion was 126, with an average of 5.4 x-rays per patient, 8 patients had a fluoroscopy and 1 patient underwent a gastrograffin swallow study. None of the patients required a CT scan.

There were several significant complications in patients post multiple magnet ingestion, 3 patients had bowel obstruction, 5 patients had fistulas, 2 patients had bowel perforations, 1 patient had complications of sepsis and thrombophlebitis due to total parenteral nutrition, 1 patient had bowel gangrene which required a second laparotomy and resection of a segment of the ileum.

The average length of stay for patients admitted to hospital for MM ingestion was 5.5 days.

The average cost of each patient admitted magnet ingestion is 14,285 AED.

Discussion: This study confirms a significant linear exponential increase in the incidence of magnet ingestion over the past 3 years. This is likely to be attributed to the increased widespread of toy magnets in the market and the lack of awareness of the families towards the morbidity and potential mortality of multiple magnets ingestion.

Our study highlights and confirms a significant clinical impact and health burden on ingestion of MM in children in the UAE. This data should support the recommendation of a mandatory product recall of toy magnets in the UAE. This will inevitably reduce the incidence of multiple magnet ingestions, as has been observed in other countries after the recall.

Speakers' Abstracts

Day2, Friday | 19 March, 2021

SESSION-5: Abstract Presentation

14:05-14:15

Use of Antibiotics in treatment of acute pharyngitis versus Standardized guideline in the Pediatric Emergency Department in Mafraq Hospital: Comparative Study

**Dr. Mai Fathi Soliman**

Pediatric Resident
 Sheikh Shakhbout Medical City
 Abu Dhabi, UAE



Background: Acute pharyngitis accounts for 6% of all primary care physician visits and 40% of children older than 3 years presenting with sore throat and test positive for Group A beta-hemolytic Streptococcus. The benefit of treatment of GAS pharyngitis is to prevent complications, but administering antibiotics to children with viral pharyngitis is ineffective and costly.

Objectives: To assess the proper usage of antibiotic prescriptions in children with pharyngitis in the emergency department and compare our practice to clinical guidelines in prescription of antibiotics.

Method: Retrospective review of electronic health records of patients with diagnosis of pharyngitis age 6 months to 15 years in an emergency department at Mafraq hospital between the periods of 2015-2016. We included all children with Rapid antigen streptococcus test (RADT), and collected data on throat culture, clinical scoring systems (Mclsaac), type of antibiotics, doses and duration. RADTs that were not done were excluded. Patients were divided in two groups based on age to younger and older than three years. Guidelines used based on IDSA 2012 and AAP guidelines.

Results: A total of 441 met search criteria but only 431 patients were included in the study due to incomplete records of the remaining 10 patients. Children between age of 3 and 15 years old accounted for 255 of the total sample, RADT was positive in 40 patients (15%), antibiotics were given in 35 patients in whom 17 patients had Centor criteria less than 3. From 215 patients with negative RADT, antibiotics were prescribed in 72 patients with Centor criteria less than 3 without confirming with throat culture. Most commonly prescribed antibiotics was Amoxicillin-Clavulanic (31.8%) then azithromycin (5.1%). Correct dose in 45% and duration in 8%. Children less than 3 years old are 176 (41%). RADT was positive in 6 patients (3%). Antibiotics were given in 60 patients (34%) including 54 patients with negative RST.

Conclusion: There was over prescription of unnecessary antibiotics as well no adherence to guidelines in choices, duration and doses of antibiotics.

References:

- American Academy of Pediatrics. 2003 Red Book: Report of the Committee on Infectious Diseases. 26th ed. Elk Grove Village, Ill: American Academy of Pediatrics; 2003:573-584.
- Stanford T. Shulman, Alan L. Bisno, Herbert W. Clegg, Michael A. Gerber, Edward L. Kaplan, Grace Lee, Judith M. Martin, and Chris Van Beneden Clinical Practice Guideline for the Diagnosis and Management of Group A Streptococcal Pharyngitis: 2012 Update by the Infectious Diseases Society of America Volume 55, Issue 10, 15 November 2012, Pages e86–e102.
- Marta Regoli, Elena Chiappini, Francesca Bonsignori, Luisa Galli, Maurizio de Martino Update on the management of acute pharyngitis in children, Italian journal of paediatrics 2011 Jan 31. doi: 10.1186/1824-7288-37-10.

Speakers' Abstracts

Day2, Friday | 19 March, 2021

SESSION-5: Abstract Presentation

14:15-14:25

Acute bronchiolitis drug therapy guidelines compliance rate in a cohort of hospitalized patients: A single center review



Dr. Maha Khalil Abass

Pediatric Resident
Sheikh Shakhbout Medical City
Abu Dhabi, UAE



Learning Objectives

- Identify compliance with drug therapy guidelines in hospitalized patients with acute bronchiolitis
- Discuss possible reasons for non compliance
- Explain ways to improve practice compliance with the guidelines

Methods: Retrospective electronic health record review at SSMC hospital from Sept.to Dec.2020 for patients 1 month to 23 months of age with an initial ICD- code for acute bronchiolitis. Cases were reviewed for drug therapy prescription and for documentation of indication for any prescribed drug (i.e. comorbid reactive airway disease (RAD) and secondary bacterial infection respectively)

Results: 83 cases met search criteria, of those 70 cases met criteria of initial diagnosis of acute bronchiolitis. 68.6% males, 31.3% females. Steroids were prescribed in 30% of the cases (62 % were due to RAD). Hypertonic saline was prescribed in 41%). 48.5% of the cases received antibiotics during hospital stay, with only 29 % of them documented to be due to secondary bacterial infection. As for the overall severity of the cohort, only 63% received NIPPV.

Conclusions: Further education and regular practice audit is needed to minimize patient exposure to unnecessary and wasteful drug therapy in managing acute bronchiolitis.

References:

CPG - BRONCHIOLITIS.pdf (seha.ae)
peds20142742 1474..1502 (aappublications.org)
Bronchiolitis in children: diagnosis and management (nice.org.uk)

Speakers' Abstracts

Day2, Friday | 19 March, 2021

SESSION-6

15:25-15:55 COVID-19 precaution in the post vaccination era

**Dr. Jennifer Blumenthal**

Instructor in Pediatric Critical Care Medicine & Pediatric Infectious Diseases
Harvard Medical School, Boston Children's Hospital, MA, USA



Outlines:

- Current state of COVID-19 Infection Prevention
- Considerations and Controversies ahead
- Boston Children's Hospital's approach

The ongoing COVID-19 epidemic has led to a rapid increase in the emphasis on infection prevention and control in hospitals and in the community, particularly as it pertains to protecting hospital employees and healthcare providers. Concepts of "best practices" have rapidly shifted as massive amounts of information have been gathered and disseminated throughout the world. Personal protective equipment shortages and further understanding of aerosol vs droplet transmission as well as groups that are most at risk has led to appropriate changes in practice to optimize delivery of healthcare and safety for all. In the future, given ongoing vaccination for healthcare personnel as well as the general public, the rules will likely shift again with new information. Learning to adapt rapidly and safely has been a top priority, particularly given the subvariants of the viral strains which are now emerging.

15:55-16:20 Chronic lymphadenopathy, the good, the bad, and the ugly

**Dr. Lynda Villagomez**

Pediatric Hematology/Oncology/ BMT Fellow at
Nationwide Children's Hospital, Columbus, Ohio, USA



Learning Objectives:

- Review the most common causes of chronic lymphadenopathy in children and adolescents
- Develop a comprehensive differential utilizing key factors such as anatomical location and clinical presentation
- Identify patients who require urgent evaluation and subspecialty referral

References:

- Gosche, J.R., Vick, L., 2006. Acute, subacute, and chronic cervical lymphadenitis in children. *Seminars in Pediatric Surgery* 15, 99–106. doi:10.1053/j.sempedsurg.2006.02.007
- Oguz, Aynur. 10/2006. "Evaluation of Peripheral Lymphadenopathy in Children." *Pediatric Hematology and Oncology* 23 (7): 549-561. doi:10.1080/08880010600856907.
- Sahai, S., 2013. Lymphadenopathy. *Pediatrics in Review* 34, 216–227. doi:10.1542/pir.34-5-216

Speakers' Abstracts

Day2, Friday | 19 March, 2021

SESSION-6

16:20-16:45

Stem Cell Transplantation - Identifying the right candidate

**Dr. Leslie Lehmann**

Director, Clinical Stem Cell Transplantation Program
 Medical Director, International Hematology/Oncology/BMT
 Boston Children's Hospital, MA, USA



Learning Objectives:

- Describe pediatric conditions for which SCT is the only or the best therapy
- Appreciate common and unexpected toxicities of SCT
- Understand new approaches that may improve efficacy or decrease toxicity of SCT

Methods: literature review

Results: increasing indications for SCT for both benign and malignant pediatric conditions

Conclusions: Choosing to proceed with SCT in a child requires careful examination of potential efficacy, expected toxicities and current and evolving alternative therapies

References:

- Arai S Increasing incidence of cGVHD in allogeneic SCT: BBMT, 2015
- Levine J Priorities for improving outcomes for nonmalignant blood disorders: BBMT 2020
- Esrick E Posttranscriptional genetic silencing of BCL11A to treat sickle cell disease: NEJM 2021

16:45-17:10

Hip disorders: Evaluation and Referral

**Dr. Patrick Whitlock**

Orthopaedic Surgeon & Assoc. Prof. in the Division of Orthopaedic Surgery
 Cincinnati Children's Hospital Medical Center, Ohio, USA



Outlines: Hip disorders are both highly prevalent & diverse among pediatric patients. Causes include congenital, developmental, infectious, inflammatory, traumatic, and neoplastic processes. Pertinent clinical history, such as patient age and habitus, combined with laboratory test results helps narrow the differential diagnosis. However, the symptoms can be nonspecific (hip pain, irritability, limp), and clinical examination findings are often unreliable. Imaging plays a crucial role in differentiating benign from more serious disorders; directing appropriate management; and minimizing later complications, particularly osteoarthritis in adulthood.

Speakers' Abstracts

Day2, Friday | 19 March, 2021

WORKSHOPS DAY 2

17:40-18:40

(Workshop 5) Pediatric Colorectal Problems in Children - What does the pediatrician need to know?



Dr. Marc Levitt

Chief, Division of Colorectal & Pelvic Reconstruction
Children's National Hospital, Washington, D.C., USA



Learning Objectives:

- Discuss how to evaluate patients with pediatric colorectal problems.
- Explain multidisciplinary medical and surgical management for the variety of colorectal conditions

17:40-18:40

(Workshop 6) Giving a Dynamic Presentation: Writing theTalk and Making the slides



Dr. James Callahan

Professor of Clinical Pediatrics, University of Pennsylvania Perelman School of Medicine
Medical Director of Global Pediatric Education, Children's Hospital of Philadelphia, PA, USA



Learning Objectives:

- Describe the steps in constructing an effective scientific presentation
- Discuss how to effectively use audio-visual materials in scientific presentations
- Compare effective presentation strategies based on subject and content

Methods: the presentation will involve a review of the steps to be followed to produce & present effective scientific presentations. This will be done in a lecture – based format with audience participation and display of effective presentation tools.

Results: participants will be better able to prepare effective scientific presentations.

References:

- Grunwald T, Corsbie-Massay C. Guidelines for cognitively efficient multimedia learning tools: educational strategies, cognitive load and interface design. Acad Med 2006;81(3):213-223.
- Issa N, Mayer RE, Schuller M, et al. Teaching for understanding in medical classrooms using multimedia design principles. Med Educ 2013;47:388 – 396.
- Issa N, Schuller M, Santacaterina S, et al. Applying multimedia design principles enhances learning in medical education. Med Educ 2011; 45:818-826.

Speakers' Abstracts

Day2, Friday | 19 March, 2021

WORKSHOPS DAY 2

18:40-19:40 (Workshop 7) Impact of Pandemic on Training

**Dr. Javier Gonzalez del Rey**

Prof. of Pediatrics, Assoc. Chair for Education & Co-Director of the Cincinnati Children's Pediatric Education Center, Cincinnati Children's Hospital Medical Center, Ohio, USA



Learning Objectives:

- Different areas affected during COVID pandemic in USA related to Pediatric Residency Training.
- Multiple approaches utilized to compensate restrictions required during pandemic (Interviews, Rotations, Patient Care, etc).
- Recovery phase implementation (introduction of learners at multiple levels and systems as well as use of Telemedicine)

18:40-19:40 (Workshop 8) Pediatric Educational Opportunities at CHOP

**Dr. James Callahan**

Professor of Clinical Pediatrics, University of Pennsylvania Perelman School of Medicine
Medical Director of Global Pediatric Education, Children's Hospital of Philadelphia, PA, USA



SPEAKERS' ABSTRACTS

Day3, Saturday | 20 March, 2021

Speakers' Abstracts

Day3, Saturday | 20 March, 2021

SESSION-7: Quality and patient safety

11:05-11:30

An Ounce of Prevention is Worth a Pound of Cure: Near Miss Monitoring to Save Lives



Dr. Maya Mallat Yassin

Group Director of Quality
SEHA, Abu Dhabi, UAE



Adverse events are known to harm thousands of patients every year. Such incidents reflect only the tip of the iceberg. Equal prominence should be given to near misses, events that could have inflicted patient harm as these occur much more frequently than adverse events. The analysis of near misses helps preempt injury by revealing deep-rooted system causal factors and by offering recovery strategies. Unfortunately, near misses are overlooked as sources of learning in favor of harmful events. The presentation addresses the importance of learning from near misses in the context of a program for proactive risk management. It provides a review of:

- The patient safety literature including important definitions, types of near misses and relationships among errors, adverse events, near misses and bad outcomes
- The importance of learning from near misses through practical examples
- How high reliability organizations learn from near misses
- Barriers to reporting and learning from near misses
- Strategies for organizations to learn from near misses

11:30-11:55

Pediatric medicine between quality, productivity and profitability



Dr. Mahjabeen Ilyas Khan

Director of Revenue Development Management
Finance Department, Sheikh Khalifa Medical City
Abu Dhabi, UAE



Should we be prioritizing patient care or worrying about keeping up with the financial performance metrics? During these trying times financial sustainability has become a topic of elevated interest. This talk will shed light on how we at SKMC have managed to balance both worlds whereby CDI (clinical documentation improvement) teams work hand in hand with physicians to ensure that timely and accurate documentation of clinical care drives quality, productivity, and financial sustainability.

Speakers' Abstracts

Day3, Saturday | 20 March, 2021

SESSION-7: Quality and patient safety

11:55-12:20

Quality improvement and patient safety



Dr. Fayeza Saif Alyafei
Chief Quality Director
Sheikh Khalifa Medical City
Abu Dhabi, UAE



Learning Objectives:

After this session attendees will be able to

- Apply IHI's Whole System Quality approach
- Compare the whole system quality approach to an example of whole system quality in practice
- Describe and apply practical steps to take toward whole system quality as a QI leader or specialist

Abstract: By pursuing whole system quality through a process of rigorous learning, health care organizations can design resilient and responsive management systems to continuously deliver services that reliably and sustainably meet the evolving needs of their patients, populations, and communities—in times of stability and crisis alike.

Conclusions: In this session, we will combine decades of quality scholarship with insights gleaned from the recent pandemic to reveal a way forward in health care. We will detail the management practices and leadership principles that enable systems to pursue quality—with ambition, alignment, and agility—through a commitment to learning.

References: IHI

12:20-12:45

DNR: Wishes versus reality (WS)



Dr. Hala Abu Zaid
Chairman, CCM
Tawam Hospital, Al Ain, UAE



Do not resuscitate orders have been creating a lot of confusion and inconsistencies amongst health care professionals in the recent years specially at the GCC.

The presentation will shed some high lights on the post Federal law era 2016 and how the DNR orders have evolved to help patients and communities and avoid confusion.

The emphasis will be in UAE, within Seha as well as MOHAP policies and the way forward changing the paradigm towards a consistent approach in dealing with this ethical matter and get all the medical community collaboration and the public into determining goals of care for patients.

Speakers' Abstracts

Day3, Saturday | 20 March, 2021

SESSION-8

13:15-13:40

Allergic disorders: Treat, defer, or refer

**Dr. Hiba Shendi**

Consultant Immunologist
Asst. Prof., Tawam Hospital, Al Ain, UAE



Allergic disorders are common, affecting up to 20% of individuals. They are associated with significant morbidity and risk of mortality, e.g. in cases of anaphylaxis. Evaluation and management of food allergy, anaphylaxis and allergic rhinitis will be discussed with recommendations on when to refer to an allergist.

13:40-14:05

Clinic follow up needs of the premature

**Dr. Fares Chedid**

Chief of Neonatology, Kanad Hospital
Al Ain, Abu Dhabi, UAE



Outlines: Babies are surviving increasingly premature births due to the dramatic improvements in neonatal intensive care, advances in neurodevelopmental care techniques, and use of prenatal steroids, surfactant, and continuous positive airway pressure (CPAP).

Premature infants, particularly those born extremely early, often have or are at risk of developing bronchopulmonary dysplasia, retinopathy of prematurity, intraventricular hemorrhage, hypoxic-ischemic encephalopathy (HIE), necrotizing enterocolitis, and other complications that require follow-up in the neonatal period and beyond. The medical home will often need to manage supplemental oxygen, feedings through gastrostomy or jejunostomy tubes, specialized immunizations, and specialized formulas, as well as coordinate the care provided by multiple subspecialists and/or developmental therapists.

Specialized preterm infant follow-up clinics are becoming more available and can help detect and address complications. International guidelines emphasize the importance of early diagnosis so that targeted early interventions can begin.

Speakers' Abstracts

Day3, Saturday | 20 March, 2021

SESSION-8

14:05-14:30

National Neonatal Screening Program in United Arab Program

**Dr. Mohamed Salaheldin Riad**

Consultant Medical Genetics, Program Coordinator of National Preventive Genetic Programs in the UAE, Ministry of Health & Prevention, UAE
Pure Health, UAE



Introduction or background: The National Neonatal Screening Program in the UAE was launched in January 1995 and every newborn is currently screened for >50 diseases selected according to the American College of Medical Genetics guidelines. The mission of the program is to ensure that every newborn receives screening and early effective diagnosis and treatment for all the selected genetic conditions.

Objectives: The objective is to raise awareness and to share the latest updates about the program.

Methods:

- TSH, 17 α -OH Progesterone, G6PD, Biotinidase, Galactosemia & IRT by Fluorometric method Genetic Screening Processor (GSP).
- Sickle cell disease & Other Hemoglobinopathies by High Performance Liquid Chromatography (HPLC) variant system.
- Amino Acid, Organic Acid & Fatty Acid Oxidation Disorders by Tandem Mass Spectrometry (MS/MS).

Results & Discussions:

The following diseases had been identified

- 704 Congenital Hypothyroidism cases (incidence 1:1,997) (JAN 1998 - DEC 2020).
- 107 Congenital Adrenal Hyperplasia (incidence 1:8,728) (JAN 2007 - DEC 2020).
- 78 Biotinidase Deficiency (incidence 1:8,481) (JAN 2010 - DEC 2020).
- 299 Amino Acid, Organic Acid and Fatty Acid cases (MS/MS) (incidence 1:2,428) (March 2011- DEC 2020) 89 Phenylketonuria (PKU) (incidence 1:14,605) (JAN 1995 - DEC 2020).
- 436 sickle cell diseases (incidence 0.43/1000) (JAN 2002 - DEC 2020), 9776 sickle cell traits (incidence 9.5/1000), 79 β -thalassemia diseases (incidence 0.08/1000)
- 14 Galactosemia (incidence 1:14,712) (August 2016 - DEC 2020).
- 2502 G6PD (incidence 1:34) (JUL 2019 - DEC 2020).
- 6 Cystic Fibrosis (incidence 1:10,012) (Nov 2019- DEC 2020)

Conclusion:

- Since 1995, 4225 infants were saved from mortality and/or physical, mental and other associated morbidities through screening of more than 1,350,000 infants for >50 hereditary diseases
- Percentage of active participation (%Uptake) not reaching the international figure of 95-99% of the total live births as a result of weak private sector participation.

References:

- Newborn Screening Manual. A GUIDE FOR NEWBORN CARE PROVIDERS. Ontario's newborn screening system. Edition 2.1, February 2018.
- Key Performance Indicators for the NHS screening programmes, Public Health England, April 2017- March 2018.

14:30-14:55

The Psychological Effects of COVID-19

**Dr. Amani Osman Hassan**

Consultant Child and Adolescent, Psychiatrist
Behavioral Science Pavilion, Sheikh Khalifa Medical City,
Abu Dhabi, UAE



Learning Objectives:

- Describe the changes that happen/ed in the child's life during the pandemic
- Describe the positive and negative impacts of the pandemic
- Describe the management of the psychological sequelae of the pandemic

Speakers' Abstracts

Day3, Saturday | 20 March, 2021

SESSION-9

15:55-16:20

Spinal disorders: How to evaluate, when to consider surgery + pulmonary care?

**Dr. Patrick Cahill**

Robert M. Campbell Endowed Chair of Thoracic Insufficiency Syndrome, Pediatric Orthopedic Spine Surgery - Division of Orthopaedics, Children's Hospital of Philadelphia, PA, USA

**Dr. Jason Anari**

Assistant Professor of Orthopaedic Surgery, Pediatric Orthopaedic Surgeon Division of Orthopaedics at Children's Hospital of Philadelphia, PA, USA



Learning Objectives:

- Understand the broad categories of spinal deformity in children
- Understand the natural history of scoliosis

Methods: Review of the state-of-the-art for pediatric spinal deformity care

Results: Spinal deformity surgery improves pulmonary outcomes in severe scoliosis

Conclusions: Spinal deformity surgery is safe and effective

16:20-16:45

Update on Cerebral Palsy: Review of Treatment Paradigms for Spasticity

**Dr. Charles Stevenson**

Assoc. Prof. of Neurological Surgery & Pediatrics
Surgical Director of The Cure Starts Now Foundation Brain Tumor Center
Cincinnati Children's Hospital Medical Center, Ohio, USA



Learning Objectives:

- Review effective treatment options for tone management in children with spastic cerebral palsy
- Discuss indications, procedures, and outcomes for the surgical treatment of spasticity, including intrathecal baclofen therapy and selective dorsal rhizotomy (SDR) surgery
- Examine the role for a multi-specialty team to optimize treatment and outcomes in children with spastic cerebral palsy

Conclusions: Surgical treatment of spasticity is an essential component in the comprehensive management of children with cerebral palsy. To achieve long-term, satisfactory control of hypertonia, a multi-faceted approach is vital-building a multi-disciplinary team comprised of pediatrics, neurology, neurosurgery, orthopaedic surgery, physical medicine/rehabilitation, and physiotherapy is critical for optimal patient outcomes. Definitive management of lower extremity spasticity can dramatically improve comfort and independent mobility in this patient population.

Speakers' Abstracts

Day3, Saturday | 20 March, 2021

SESSION-9

16:45-17:10

Vitamin D Deficiency in the Era of Precision Medicine

**Dr. Michael Levine**

Lester Baker Endowed Chair & Professor Emeritus of Pediatrics & Medicine at the University of Pennsylvania
 Chief Emeritus of Endocrinology & Diabetes and Director of the Center for Bone Health
 Children's Hospital of Philadelphia, PA, USA



Learning Objectives:

- Describe the mechanism for activation of parent vitamin D.
- Evaluate the biochemical and genetic basis for vitamin D deficiency.
- Formulate a personalized treatment plan for vitamin D deficiency.

Methods: Genetic and biochemical evaluation of patients with reduced serum concentrations of vitamin D metabolites.

Results: Polymorphisms and mutations in several important genes that are involved in vitamin D homeostasis can mimic nutritional vitamin D deficiency. Physiological alterations that accompany obesity and aging, as well as use of medications that induce hepatic P450 enzymes, can lead to specific defects in vitamin D homeostasis that can be treated with specialized metabolites of vitamin D to provide a more precise therapeutic approach.

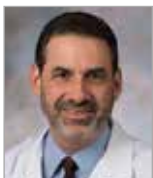
Conclusions: Understanding the basis for vitamin D deficiency can allow clinicians to develop precise & personalized approaches to therapy.

References:

- Roizen JD, Levine MA 2020 Vitamin D Therapy and the Era of Precision Medicine. *J. Clin. Endocrinol. Metab.* 105
- Levine MA 2020 Diagnosis and Management of Vitamin D Dependent Rickets. *Front Pediatr* 8:315

17:10-17:35

Cleft Palate Repair by Furlow Palatoplasty

**Dr. Richard E. Kirschner**

Department Chief, Plastic & Reconstructive Surgery
 Nationwide Children's Hospital, Columbus, Ohio, USA



Learning Objectives:

- Identify the indications for Furlow palatoplasty
- Discuss the advantages of the Furlow palatoplasty technique over other techniques
- Describe the surgical technique for Furlow palatoplasty

The Furlow Z-palatoplasty may be used to achieve excellent results both in primary cleft palate repair and in secondary management of velopharyngeal dysfunction. This presentation will review the indications for Furlow palatoplasty and will review the surgical technique in detail. At the completion of the presentation, attendees will be able to discuss methods by which to optimize cleft palate repair outcomes using the Furlow z-palatoplasty.

References:

- Jackson O, Stransky CA, Jawad AF, Basta M, Solot C, Cohen M, Kirschner R, Low DW, Randall P, LaRossa D. The Children's Hospital of Philadelphia modification of the Furlow double-opposing Z-palatoplasty: 30-year experience and long-term speech outcomes. *Plast Reconstr Surg.* 2013 Sep;132(3):613-622.
- Kaye A and Kirschner RE. The Furlow Double Opposing Z-Plasty Repair for Cleft Palate. In *Comprehensive Cleft Care*, Losee JE and Kirschner RE, Eds. Boca Raton: CRC Press, 2016. Pp. 943-958.
- Furlow LT Jr Cleft palate repair by double opposing Z-plasty. *Plastic and Reconstructive Surgery*, 30 Nov 1986, 78(6):724-738

Speakers' Abstracts

Day3, Saturday | 20 March, 2021

SESSION-10

18:05-18:35 COVID Vaccine in children

**Dr. Jeffrey Gerber**

Medical Director of the Antimicrobial Stewardship Program & Associate Chief Clinical Research Officer of CHOP Research Institute, Attending physician - Division of Infectious Diseases, Children's Hospital of Philadelphia, PA, USA



Learning Objectives:

- Identify the epidemiology of SARS-CoV-2 infection and COVID-19 in children
- Discuss the approach to clinical trials testing pediatric COVID-19 vaccines
- Explain the rationale for vaccinating children against COVID-19

18:35-19:05 Approved indications of the anti-viral in the outpatient setting

**Dr. Sanjeev Swami**

Associate Professor of Clinical Pediatrics, University of Pennsylvania Perelman School of Medicine, Director of the Outpatient Infectious Diseases Clinic, Division of Infectious Diseases, Children's Hospital of Philadelphia, PA, USA



Learning Objectives:

- Describe the evaluation of an infant with suspected congenital cytomegalovirus (CMV) infection and the outpatient treatment of an infant with confirmed congenital CMV disease.
- Discuss the management of neonates with neonatal Herpes Simplex Virus (HSV) infection and role for viral suppression.
- List the therapeutic options for children with recurrent HSV infection.
- Discuss management options for children with Influenza infection.

References:

- Kimberlin D.W. Et al. NEJM 2015;372:933-43
- Rawlinson W.D. Et al. Lancet Infect Dis 2017;17:e177-88
- Kimberlin D.W. Et al. NEJM 2011;365:1284-92
- Kimberlin D.W. Et al. Pediatrics 2013;131:e635

Speakers' Abstracts

Day3, Saturday | 20 March, 2021

SESSION-10

19:05-19:35

Hypertension and the Role of Pediatric Cardiology for Identification of Coarctation

**Dr. Gerard Martin**

Medical Director Global Services C.R. Beyda,
Professor of Cardiology, Children's National
Hospital, Washington, D.C., USA

**Dr. Yves d'Udekem**

Division Chief, Cardiac Surgery | Co-Director,
Children's National Heart Institute
Children's National Hospital,
Washington, D.C., USA



Cardiovascular diseases account for nearly 1/3 of all global deaths. Hypertension, a modifiable risk factor for cardiovascular disease, is present in over 1 billion adults and less than 1 in 5 have it under control. Hypertension begins in children. Most hypertension is primary hypertension and clusters in families. Secondary causes of hypertension include kidney disease, coarctation of the aorta & renal artery stenosis. AAP has an excellent Clinical Practice Guideline for screening and management of high blood pressure in children. Blood pressure can be normal <90%, elevated >90% but <95%, Stage 1 hypertension >95% or Stage 2 hypertension >95% + 12 mm Hg. Blood pressure norms are influenced by gender, age and height. Measurement of blood pressure recommended annually in children over 3 years; earlier if other risk factors present. Important for primary care providers to identify children with coarctation of the aorta early in life. Later presentation of coarctation may result in hypertension persisting after surgical or catheter-based interventions. Surgical intervention has evolved and presents many options for effective relief of obstruction.

References:

- Flynn JT, et al. Clinical practice guideline for screening and management of high blood pressure in children and adolescents. *Pediatrics* 2017;140(3):e20171904

19:35-20:05

Common Menstrual Abnormalities in Adolescents

**Dr. Frank Biro**

Prof. of Pediatrics - Division of Adolescent and Transition Medicine,
Cincinnati Children's Hospital Medical Center within the
University of Cincinnati Department of Pediatrics, Ohio, USA



Learning Objectives

- Recognize timing of normal developmental menstrual changes
- Understand presentation and management of primary contrasted to secondary dysmenorrhea
- Understand the underlying mechanisms and management of abnormal uterine bleeding (formerly known as 'dysfunctional uterine bleeding')

Abstract: Menstrual concerns are common in the adolescent patient. It is important for the clinician to recognize serious, potentially life-threatening events, as well as when menstrual symptoms could represent important underlying pathology. This presentation will address common menstrual abnormalities, discussing normative changes, differential diagnosis, and initial management strategies.

References:

- Eckert-Lind C, Busch AS, Petersen JH, Biro FM, Butler G, Bräuner EV, Juul A. Worldwide secular trends in age at pubertal onset assessed by breast development among girls: a systematic review and meta-analysis. *JAMA Pediatr.* 2020;174(4):e195881.
- Biro FM, Huang B, Crawford PB, Lucky AW, Striegel-Moore R, Barton BA, Daniels S. Pubertal correlates in black and white girls. *J Pediatr.* 2006;148:234.
- Ryan SA. The treatment of dysmenorrhea. *Pediatr Clin N Am* 2017; 264: 331.
- Mullins ES, Miller RJ, Mullins TLK. Abnormal uterine bleeding in adolescent women. *Current Pediatrics Reports* 2018; 6: 123.
- Reindollar RH, Byrd JR, McDonough PG. Delayed sexual development: a study of 252 patients. *Am J Obstet Gynecol* 1982; 140: 371.
- Reindollar RH, Novak M, Tho SP, McDonough PG. Adult-onset amenorrhea: a study of 262 patients. *Am J Obstet Gynecol* 1986; 155: 531.

Abbott Symposium

Role of Sensor based technologies in Management of Type1 DM Patients & New Advancements in Flash Glucose Monitoring Technology

18 March, 2021
12:10-12:40 (GST/UAE Time)



Presented by:

Dr. Walid Kaplan

Chairman of the Department of Pediatrics
Tawam Hospital, Al Ain, UAE

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