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## CARTOONS AND ILLUSTRATIONS TOO!

Last month marked the debut of abstracts from JWPAM and drawings from Jack Maypole. In this issue, Terry McElroy, our second artist, debuts. Jack is a general pediatrician in Boston, who has been drawing most of his life. His witty depictions (some say too witty) are often done during lectures and rounds. Terry is a New York artist who has worked in many different media, including watercolors, oils, cut outs, and pantone. His work has been published in the New Yorker, Fortune, and Conde Nast Traveler. We will be asking authors for approval to publish illustrations with their papers. I hope their work enlivens ADC.

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# THE PROTECTION OF SUBJECTS WHO PARTICIPATE IN RESEARCH

Recent data suggest that many research reports that include children and adolescents as subjects do not contain any information about ethics committee approval.<sup>1</sup> We appreciate that the regulations governing the protection of human subjects vary from country to country, and that ethics committee approval may depend upon the study design. For example, in the US even large data set analyses and community based surveys require institutional review board approval, although this may not be true in every country. We believe it is critical that all research involving human subjects contain some statement regarding their protection. As such, we will be requiring from every author of an original research report, including case series, surveys, and epidemiologic studies, a statement about the protection of human subjects.

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# TYPE 2 DIABETES: THE CONSEQUENCES OF THE OBESITY EPIDEMIC

Approximately one in five US children are either overweight or obese. Sadly, many other countries are beginning to experience the same epidemic. Feltbower and colleagues have characterised 677 patients up to 30 years of age with diabetes attending clinics in Leeds. The vast majority had type 1 diabetes, while only 5% had type 2 diabetes. Approximately one in four patients with type 2 diabetes were south Asian. Identifying children and adolescents at risk for type 2 diabetes is increasingly important because of recent data suggesting that intensive lifestyle intervention is more effective than metformin in preventing the development of diabetes.<sup>2</sup> See page 676

#### MORE ON OBESITY AND UNDERNUTRITION

The twin maladies of obesity and undernutrition appear to occur at higher rates in infants and children growing up in less affluent environments. Armstrong and colleagues have characterised this paradox in a striking report of over 60 000 children from the Scottish National Preschool Child Health Surveillance System. The prevalence of both undernutrition and obesity were greater among children between 39 and 42 months of age growing up in an environment of social deprivation (overcrowding in housing, unemployment, low social class). Understanding why this paradox is occurring is critical if we are to improve the health and well being of poor children.

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### **UTIS: FROM DIAGNOSIS TO OUTCOME**

The process of identifying infants and children with a UTI, followed by appropriate radiographic evaluation, culminating in the correct decision about antibiotic prophylaxis or surgical intervention, is complicated. Wheeler and colleagues have done a wonderful job in summarising the literature that addresses the tail end of this decision process. They have appropriately searched, characterised, and combined the studies that address the important processes and outcomes that follow an initial UTI—recurrent disease, new or progressive renal damage, and hypertension. Sadly, there is lack of clarity whether antibiotic prophylaxis or surgical reimplantation of refluxing ureters prevents renal parenchymal disease. There are numerous caveats to this study, but this meta-analysis is well done.

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### THE POWER AND IMPACT OF NARRATIVE

My father lost his hearing in his early 20s before I was born, sensitising me to issues related to hearing loss. Clinicians from the East Anglian Cochlear Implant Programme describe seven cases of successful cochlear implantation in children who suffered a progressive hearing loss and were implanted late. This report highlights many important issues in contemporary health care, including the power of narrative, the balance between the public good and individual healthcare, and the remarkable progress in medicine. In a profession focused on evidence based medicine, story telling remains an important influence on how we practice. Second, there is often tension whether resources should be invested for the public good or focused on individual health—this struggle is likely to persist. Finally, cochlear implants represent how years of basic science research can be married with technological progress and lead to remarkable clinical advances. **See page 708** 

#### REFERENCES

- Bauchner H, Sharfstein J. The failure to report ethical approval in child health research: a review of published papers. BMJ 2001;323:318–19.
- Knowler WC, Barett-Connor E, Fowler SE, et al. Reduction in the incidence of type 2 diabetes with lifestyle intervention or metformin. N Engl J Med 2002;346:393–403.