



EUROPEAN
PAEDIATRIC
ASSOCIATION
(EPA / UNEPSA)



Newsletter

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A resounding Success
- ▶ **Excellence in Paediatrics 2011 -**
A Good Start for Better Adult Health
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Idiopathic Short Stature: Is it Worth Treating?

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Letter of the Editor

Dear Colleagues and Friends,

Our family of Newsletter readers is growing rapidly and it is a pleasure to inform that the number of recipients of this issue will jump up to **60,000 readers from more than 40 countries**. It can be said that EPA with its firm advocacy for Paediatrics is giving support and help to this vast number of people caring for children and adolescents.

To maintain our format, it is worth to refer to some upcoming EPA activities. With the echoes of success still present from the Vienna Congress, it is a great satisfaction to announce the new sites **Glasgow (2013)** and **Rome (2015)**. The UK is hosting an EPA Congress for the first time and this has a special meaning, not only for being outside the continent, but for the important paediatric tradition of this Country. Rome will be the appropriate 15th anniversary of the starting point of Europaediatrics in 2000.

Because a period of two years is perhaps too long for maintaining our scientific concern for transmission of knowledge, **Excellence in Paediatrics will remain important for EPA**. With the next edition of this conference in December in Istanbul, the leading topic is paediatric dermatology. It will update this important clinical field not always considered so. **EPA Workshops will also start**, but with no hurry in order to ascertain the quality and efficacy planned. Probably in Alicante and in the spring of 2012 there is going to be one workshop dedicated to the modern topics of paediatric nutrition. Alongside the updates from faculty, there will also be a part developed by attendees (**call for papers**). This will bring a thorough discussion in order to exchange better application of methods and eventual consolidation of lines of work. EPA credits for continuous medical education can be considered for these programmes.

Additional EPA activities are planned in response to previous surveys among our members. It appears that some areas in the paediatric practice (infectious diseases, nutrition, adolescence...) are susceptible for updating. A concise document on the diagnosis and management of cow's milk allergy will be carefully prepared in cooperation with leading specialists.

In this issue, you will find in the section Clinical Updates for Primary Care Paediatricians, comments on an article about whether to **treat or not to treat idiopathic short stature**. In a very practical way you will find how evidence based medicine can throw some light that problem.

Finally, the EPA advocacy for Paediatrics is represented by the document **European Campaign for the protection of children's rights to health and happiness**. Due to its importance we will publish it chapter by chapter in the coming issues. Working together we will contribute to better health for our children and youngsters.

Manuel Moya
Editor of Newsletter

P.S. If you wish to receive an e-alert for new issues, all you have to do is send an e-mail to epa-une psa@candc-group.com

5th Europaediatrics 2011 in Vienna - A Resounding Success



Delegates entering the Austria Center Vienna

■ A Cultural Capital for the Europaediatrics Congress

Vienna, arguably in the top five of the most cultural capitals in Europe, played host to the 5th Europaediatrics conference 2011. The doors of the magnificent modern conference center opened on the 23rd June to welcome more than 2,000 professionals from the world of paediatrics.



The main Congress hall during the Opening Ceremony

■ A Global Event Representing European Child Health Care

Representatives from 92 countries attended Europaediatrics 2011. Just short of 200 speakers and chairpersons served up 99 sessions – including lectures, debates, round tables and practical sessions. The overall emphasis of the content was placed firmly in the European arena and took into account social and demographic change within the continent as well as syndromes and diseases particularly relevant in Europe. However, delegates came from all over the world to attend the comprehensive programme.



Hands-on during a practical course on paediatric resuscitation

5th Europaediatrics 2011 in Vienna - A Resounding Success



Lively poster session

A Successful Congress

Europaediatrics 2011 was awarded 18 credits by the European Union of Medical Specialists (UEMS)/ The European Accreditation Council for Continuing Medical Education (EACCME). Delegates couldn't agree more and over 70% of attendees taking part in our evaluation process graded the conference overall as good to excellent. Everyone concerned - the organising committee, sponsors and all those participants, speakers and attendees can look back at the Vienna Congress as a complete success.

Two of Europe's Finest Cultural Cities for Europaediatrics 2013 and 2015

The venues for the next two Europaediatrics congresses have been named – Glasgow in July 2013 and Rome in 2015.

Very different in character, the two cities are undeniably in the top league of European cultural capitals.

Glasgow

Scotland's cultural and commercial capital will hold the 6th Europaediatrics conference, in conjunction with the London-based Royal College of Paediatrics and Child Health (RCPCH).

Renowned for its prowess in the conference arena, the Scottish Exhibition and Conference Centre, SECC, is situated in the heart of Glasgow and is one of the UK's largest integrated venues, purpose-built to provide exhibition and conference space.

Rome

The Italian capital has all the qualities required for a major conference, with the added bonus of the Italian Society of Paediatrics acting as host.

Rome boasts a historical heritage throughout the city, ancient parks, beautiful imposing museums and the landlocked Vatican City as well as a top-class conference venue and good hotels.



Announcement of Glasgow as the next host city of Europaediatrics

Excellence in Paediatrics: A Good Start for Better Adult Health

Research has shown that prenatal, early postnatal and infant nutrition are the most **important phases** in an individual's life as regards nutrition and affect many aspects of health including predisposition to **obesity** and even **psychological wellbeing**. In line with its importance for the health of not only the individual, but future generations, Excellence in Paediatrics has devoted a sizeable proportion of the 2011 programme to the value of good nutrition in the first few years of life.



A Balanced Diet Early Prevents Obesity Later

Experts in early nutrition and its future impact, Joseph Neu and Berthold Koletzko will focus on **pre- and postnatal diet** as a defence against later health problems. As obesity is already a worldwide childhood problem, specialists in the field Paul Gately, Matthew Gilman and Ricardo Uauy will all speak at a round table on **obesity**. Linda Adair will also give a fascinating account of the long term impact of infant nutrition and moreover, on **growth patterns**.

The Importance of Gut Bacteria

With **trillions of bacteria** (some 400 species of beneficial microbes) residing in the intestinal tract, the importance of a **balanced bacterial flora** in the gut which are thought to ward off diseases like rheumatoid arthritis and Candida infections cannot be understated. Alfredo Guarino will give a lecture on the effects of **prebiotics in infancy**.

Breast Milk – Undeniably the Best

Another vital aspect of early nutrition is **breastfeeding** and Kim Fleischer Michaelsen will present the short and long-term benefits of breast milk for the child and later development. As research has shown, **brain** (nervous system) **development** and obesity avoidance are key reasons for choosing the **breast over the bottle**.

Allergic Reaction

Special emphasis has been placed on **food allergy** and, with the interim results of the **EuroPrevall project** emerging, this topic is particularly pertinent. Using a round table presentation, Aline B. Sprickelman, Sibylle Koletzko and Kirsten Beyer will cover aspects of food allergy including the real prevalence of the problem, diagnosis of **cow's milk allergy** and other treatment options apart from allergen avoidance.

Undernutrition – a Global Problem

The closing keynote lecture of the conference will be delivered by Stanley Zlotkin of the University of Toronto, Canada on micronutrient deficiencies in **750 million children** globally. Professor Zlotkin is renowned for his work on **'home fortification'** to help eradicate undernutrition on a worldwide basis. Receiving the Order of Canada in honour of his research, he has made significant contributions to child nutrition on this enormous scale.



As part of its support to this prestigious conference, EPA has co-developed the dermatology thematic stream in collaboration with the Cochrane Child Health Field. Skin and its diseases will be presented using a mixture of lectures, round table, interactive case studies and workshops. Of particular interest, a workshop is scheduled with practical advice for clinicians dealing with vascular birth marks, a most significant and relevant field in child healthcare.

European Paediatric Association (EPA/UNEPSA)

Join the most extensive paediatric network in Europe!

Since the launch of the individual membership scheme, the European Paediatric Association (EPA/UNEPSA) embraces a constantly increasing number of individual members from all over Europe.

EPA/UNEPSA welcomes all doctors who are certified as paediatricians in Europe and are members of their respective National Paediatric Society/Association participating in EPA/UNEPSA.

By joining EPA/UNEPSA, you gain access to a network of 41 national European associations and open yourself to a new world of opportunities.

Benefits

The individual membership is offered at a privileged 50 Euro annual fee and encompasses a set of benefits that aim to provide value to the wide community of European paediatricians.

- On line access to the *Evidence Based Child Health Journal* is a core benefit of individual membership to our association and we are excited by the prospect of making such a valuable resource widely available to paediatricians across Europe.
- Our members will enjoy reduced registration fees to **Europaediatrics** as well as to other events organised by our Association.
- The **quarterly e-newsletter** aims to be a source of current information relevant to the interests of European paediatricians.
- Finally, our members will find in our **new website** a valuable tool and resource (access to the members-only section, members' forum and working groups, access to educational programmes, complimentary or privileged prices for additional on-line services, etc.)

Individual membership is offered on an annual basis starting on the 1st January of each year and ending on the 31st of December.

You may apply on line for an individual membership. Please visit our website www.epa-une psa.org for more details and to fill out a registration form.

We look forward to welcoming all of you in EPA/UNEPSA!



Building a pan-European Paediatric Community

Get acquainted with EPA/UNEPSA fellow members, **visit now our Forum!**



<http://www.epa-une psa.org/forums/forum-members>



Idiopathic Short Stature: Is it Worth Treating?

Manuel Moya

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This common question, raised by many parents in a general paediatric clinic, could perhaps be answered by an interesting recent systematic review by Annalisa Deodati and Stefano Cianfarani. The article appeared in the British Medical Journal ⁽¹⁾.

Before discussing the practical issues of this paper it is convenient to refresh the concept of Idiopathic Short Stature (ISS) and also that of the systematic review. ISS is to be considered when a child has a height reduction greater than -2 standard deviations (SD) below the average for a given age and gender population, and also if his/her height reduction at that given moment is greater than -2 SD for mid-parental target height and also if the peak growth hormone is greater of 10 ng/ml and finally not suffering from co-morbidities that could impair growth. In conclusion they are normal short children. The second concept to understand this paper is systematic review (SR). If a meta-analysis is basically the statistical work that is applied carefully and judiciously to the bulk of the paper's aim of the review, then a systematic review starts after a clearly formulated question that uses systematic and explicit methods to identify, select and critically appraise relevant research, and to collect the analyzed data from the mentioned studies included in the review. Therefore SR is a wider approach that is not even necessarily using meta-analysis data ⁽²⁾.

The paper is well designed and carried out, although most of the articles included in the review do not give the desired results. There are 19 long-term studies and out of these nine were excluded for quality reasons, and only three were randomized control trials (RCT). RCT-based papers are ideal for SR and are considered the most reliable form of scientific evidence because they reduce spurious causality and bias. The fact of using the standard deviation score (SD-score) permits a comparison that could hardly be done using conventional percentile charts. However, because in primary care this way of quantifying growth deviation it is not always feasible, we should continue to use these growth charts (national, Cole's...). ISS is considered when height is below the third centile and when sequential heights are below the mid-parental target height, estimated by the simple formula: (Father height + Mother height +/- 13) / 2; plus(+) in the case of a male and minus (-) in the case of a female (Figure).

The highest achievement of this SR is related to the long-term follow up i.e up to adult height has been reached, this is considered when growth velocity was less than 1.5 cm / year or bone age was 15 in females or 16 in males. That allows to assess 'effect size' of the treated patients versus not treated among many other interesting data. Even from the excluded studies information on safety or side effects is obtained.

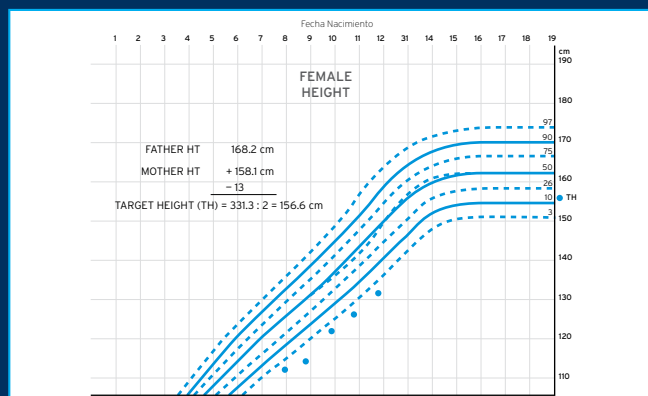
The main result of this SR is related to the adult height gained by

the treated group of 0.5 SD which is equivalent to 4 cm, the forest plot of randomized trials leaves few doubts about this favourable therapy. This is a clear result but some considerations should be taken into account. One group of them is related to the patients themselves. In this review under the ISS concept the two 'normal variants of short stature' were included: Familial short stature and Constitutional growth delay. That can bias results particularly if the SD mid-parental target height is not available. The authors also point out that individual variation was quite important, although they were considering the means.

If we consider the clinical relevance of a 4 cm gain for final height some debate is sure to arise. Obviously, at the beginning when the treatment is suggested almost everybody would be ready to accept this gain although underneath they would be expecting more, like the 9 cm gained in the case of Turner syndrome. Also the dose related results comes up fiercely. But if we take into account the number of dropouts and the patients who become really tired after 5 or 6 years daily injections, then this must also be considered

Finally, the authors very accurately calculate the cost benefit ratio of this treatment and it is clear that a 1 cm gain costs 27,000 euro. If you put this in a general context of health necessities, this treatment, normally covered by the health system, for short children otherwise normal is something to be considered by us paediatricians and health authorities.

I would like to conclude that until no more beneficial results are demonstrated by further randomized trials it is probably worth giving the conventional and particularly nutritional care to this population.



1. Deodati A, Cianfarani S. Impact of growth hormone therapy on adult height of children with idiopathic short stature: systematic review. *BMJ* 2011; 342: c7157 doi: 10.1136/bmj.c7157

2. Po A. Hierarchy of evidence: data from different trials. *Prescriber* 2002; 13: 18-23

Summer 2011: A Successful Season for European Paediatric Conferences

Paediatrics Societies from Four Countries

The first half of June of this year saw the fruits of extremely hard work and dedication for four European paediatrics societies, all members of the European Paediatric Association (EPA/UNEPSA). Conferences organised by the respective societies were held in

Greece, Italy, Poland and Spain.

All conferences were well attended and EPA was present at all four events to promote the interests of paediatrics throughout Europe.

67th Italian Congress of Paediatrics



Milan Convention Centre

The conference, held in the Milan Convention Centre from 7th to 10th June saw in excess of 1,500 delegates through the door each day.

A welcome reception was followed by a performance of Antonio Albanese, a famous Italian stand-up comedian.

By definition, paediatrics themes span a wide range of disciplines. On the first afternoon alone, topics ranged from the rights of migrant children, cystic fibrosis, human papilloma virus (HPV), new vaccines for meningococcal meningitis and a workshop on haemorrhagic diarrhea and haemolytic-uremic syndrome.

Polish society of Paediatric XXXI Congress

The conference took place at the International Fair, Szczecińskich. Nearly 2,000 doctors from all over Poland, 150 researchers from Poland and abroad and over 100 exhibitors attended the conference. The congress presented a wide range of important issues and reports relating to the prevention, diagnosis and treatment of many diseases

encountered in paediatric daily practice.

Professor Robert Block, the President-elect of the American Academy of Paediatrics, presented the inaugural lecture on health care of children and young people in Europe and North America.

Building a pan-European Paediatric Community

Get acquainted with EPA/UNEPSA fellow members,
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Summer 2011: A Successful Season for European Paediatric Conferences

49th Panhellenic Congress of Paediatrics



Prof. Konstantopoulos addressing the audience

From the 10th to 12th June, Costa Navarino, Messinia saw the advent of this prestigious conference and the celebration of the Hellenic Paediatric Society's 80th anniversary.

As in every year the formulation of the scientific programme was guided by the promotion of knowledge to satisfy the widest possible range of contemporary issues in the field of paediatrics.

The highlight of the Congress was an innovative session that was held during the Closing Ceremony of the Congress where eminent Greek paediatricians answered questions submitted by parents, pre-Congress, on the official website of the Hellenic Paediatric Society. This Q&A session covered "hot-topics" in child health including allergies, accidents, metabolic diseases and other concurrent topics. The session was webcasted and received very positive feedback not only from the Greek paediatric community but also from parents.

60th Congress of the Spanish Paediatric Society



The exhibition area

From the 16th to 18th June, Valladolid in Spain witnessed the influx of around 1,600 paediatric professionals to attend a programme of high scientific interest representing the majority of the many areas of Paediatrics.

In the spotlight, child nutrition featured against a background where the typical Mediterranean diet seems to be long forgotten and childhood obesity has doubled in the last 15 years according to the 2010 obesity statistics.

All in all, I think you will all agree, this summer will be recorded as a very successful season in the advancement of standards and education in the field of paediatrics.

2011

Member Societies' Meetings

■ **DGKJ Annual Meeting - German Society of Paediatric and Adolescent Medicine**

22-25 September 2011, Bielefeld, Germany

■ **Romanian Paediatric National Congress with international participation**

28 September – 1 October 2011, Bucharest, Romania

■ **Annual Meeting of Paediatric Association of Serbia**

29 September – 1 October 2011, Nis, Serbia

■ **Annual Conference of Lithuanian Paediatric Society**

7 October 2011, Vilnius, Lithuania

■ **5th Congress of Paediatric Association of Macedonia with international participation**

5-9 October 2011, Ohrid, FYROM

■ **National Congress of Paediatrics - Albanian Paediatric Society**

28-29 October 2011, Tirana, Albania

■ **32nd Annual Congress - Paediatric Association of the Netherlands**

2-4 November 2011, Veldhoven, the Netherlands

■ **7th Pan-Hellenic Paediatric Sub-specialties Conference, Hellenic Paediatric Society**

3-4 March 2012, Athens, Greece

■ **Royal College of Paediatrics and Child Health Annual Conference 2012**

22-24 May 2012, Glasgow, United Kingdom

■ **50th Pan-Hellenic Paediatric Conference - Hellenic Paediatric Society**

1-3 June 2012, Ioannina, Greece

Other Paediatric Meetings in Europe

■ **International Congress of Paediatric Hepatology, Gastroenterology and Nutrition**

21 - 24 September 2011, Sharm El-Sheikh, Egypt

■ **5° Congresso Nazionale della Federazione Italiana Medici Pediatri (FIMP)**

29 September – 1 October 2011, Torino, Italy

■ **11th International Conference of Osteogenesis Imperfecta**

2-5 October 2011, Dubrovnik, Croatia

■ **EAACI Paediatric Allergy and Asthma Meeting(PAAM)2011**

13 - 15 October 2011, Barcelona, Spain

■ **XVIII Congresso Nazionale Società Italiana di Gastroenterologia Epatologia e Nutrizione Pediatrica (SIGENP)**

13-15 October 2011, Padova, Italy

■ **17° Congresso Nazionale della Società Italiana di Neonatologia (SIN)**

11-14 October 2011, Sorrento, Italy

■ **4th European School of Social Paediatrics**

20-22 October 2011, Dubrovnik Croatia

■ **22nd Medical & Nursing Annual Congress of the European Society of Paediatric and Neonatal Intensive Care**

2-5 November 2011, Hannover, Germany

■ **Excellence in Paediatrics**

30 November - 3 December 2011, Istanbul, Turkey

■ **Excellence in Child Mental Health**

30 November - 3 December 2011, Istanbul, Turkey

■ **1st PNAE Congress on Paediatric Nursing**

1-2 December 2011, Istanbul, Turkey

■ **ESTRO teaching course "Paediatric Radiation Oncology"**

1 - 3 December 2011, Brussels, Belgium

■ **XVIII Congresso Nazionale Società Italiana di Endocrinologia e Diabetologia Pediatrica (SIEDP/ ISPED)**

1-3 December 2011, Genova, Italy

■ **Sustainable Paediatric Workforce Solutions**

7 December 2011, London, United Kingdom

■ **34th UMEMPS Congress**

23-26 September 2012, Kos, Greece

List of member countries and links to societies' websites

[Albania](#)

Albanian Paediatric Society

[Armenia](#)

Armenian Association of Paediatrics

[Austria](#)

Oesterreichische Gesellschaft für Kinder- und Jugendheilkunde (OEGKJ)

[Belgium](#)

Société Belge de Pédiatrie/Belgische Vereniging voor Kindergeneeskunde

[Bosnia and Herzegovina](#)

Paediatric Society of Bosnia and Herzegovina

[Bulgaria](#)

Bulgarian Paediatric Association

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Società Italiana di Pediatria

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[Portugal](#)

Sociedade Portuguesa de Pediatria

[Romania](#)

Societatea Romana de Pediatrie

Societatea Romana de Pediatrie Sociala

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Türk Pediatri Kurumu

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Ukraine Paediatric Association

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Royal College of Paediatrics and Child Health

EPA Welcomes Corporate Partners

EPA is an association for medical professionals. Our network is a fantastic talent pool of 44,000 paediatric healthcare professionals, who every year share their brilliant questions and suggestions on how to best understand and improve general paediatric practice. EPA always responds to such important feedback. Importantly, however, to be able to address shared issues, unmet needs or to develop good ideas and exciting initiatives, even after prioritisation, we need external financial resources.

EPA has therefore developed a corporate partnership programme that allows companies to support our work provided they share our mission and values, and comply with our ethical principles and Guidelines for Relations with Industry. Jointly we can understand diverse issues better, and develop targeted activities to effectively meet paediatricians' needs for medical education, best practice guidelines, and interactive communication. By working, learning and developing together - by proactively combining our strengths - we can develop and improve the clinical standards, and ultimately also European child health.

EPA would like to welcome its corporate partners and acknowledge their support in the development of the following exciting initiatives:



"Good Health begins with Good Hygiene"

EPA and Reckitt Benckiser (RB) believe that good hygiene is a key ingredient to good health and work jointly to educate the public on the benefits of adopting good hygiene habits, both personal, in the home, and to explain why good health begins with good hygiene.



Early Feeding Initiative

EPA and Pfizer Nutrition believe the chances of a healthy life are greatly facilitated by a healthy infancy period. This, in turn, is facilitated by a balanced nutrition. Breastfeeding should be the norm, but where not possible balanced dietary alternatives must be available. EPA and Pfizer Nutrition promote the new paradigm in early feeding which emphasizes the need of a balanced diet also throughout infancy.



"Helping Mothers Breastfeed Longer through Advanced Education"

EPA and Philips AVENT believe breastfeeding is best for the infant and that paediatricians and health care professionals can often provide invaluable advice to mothers to initiate and sustain their breastfeeding routine. To this end, we are jointly developing an exciting educational programme, presenting state of the art knowledge as it applies to clinical practice.

PUBLICATION IDENTITY



EPA Newsletter issue 11

Newsletter of the European Paediatric Association (EPA/UNEPSA)

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