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Highlights from this issue

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I've written before about how working with a bright bunch of editors keeps me very widely informed. A bit like working in any team, by dividing up responsibilities we are able to keep abreast of a good range of what's going on. It's for this reason that I know about the NICE guidance—actually published in 2015—on managing behaviour that challenges in children with learning difficulties (*see page 24*). Naturally, while I try to read this article from Tanwar, Lloyd and Julies with an eye on how I'm going to advise and support patients, selfishness also always slips in, and I'm squirrelling this one away for use when we next have a ward-based crisis with an inpatient. The authors adapt the guidance into a very helpful figure in the paper—figure 1—which is worth some minutes of your time—not least if it reminds you that my scenario on the ward might in fact be avoidable if I recognise it early and escalate appropriately. This paper for me is a great example of good coverage of guidance I wouldn't find myself routinely reading, but which has a kernel of crackingly helpful information in it. If you're aware of other guidance we should cover, please get in touch.

Another helpful piece of guidance in this issue is the paper by Sreekantam, Preece, Vijay, Raiman, and Santra on how to use a controlled fast (*see page 28*). I should state my possible conflict, which is that I know these authors as we work in the same institution. What they've done in this paper is quite similar to what they do in real life for me, which is explain something quite complex in a way which unfolds it into something which is, if not simple, does at least make huge sense. This is a rewarding paper which you'll likely want to read once now, and again when you find yourself needing to do a controlled fast. This is February's Editor's Choice.

We've got some great other papers this month, including a review of the NICE guidance on major trauma (*see page 20*), fifteen minute consultations on the child with hypertension (*see page 2*) and the healthy child who is breastfeeding (*see page 8*). We've also got a fascinating paper from the authors who wrote in the blue ADC a few months ago about female genital mutilation, in this instance on how to set up a clinic (*see page 14*). There are also papers on congenital abdominal wall defects (*see page 19*), how to use serum creatinine (*see page 37*) and GFR, penicillin antibiotics (*see*

page 44), and training in research competencies (*see page 51*). In short, if you can't find something to interest you this month, you're not trying hard enough.

Lastly, I've written about how much I rely on the people around me to ensure that you get the very best journal articles to read. This extends also to my bosses, and this issue coincides with Mark Beattie's last issue as editor of ADC, and as Editor in Chief of the ADC journal family. I've worked with Mark for five years as EiC and he's been all I could have wished for. He has been a wise and supportive mentor, who has consistently and skillfully judged when to intervene with support and when to give me space to work things out for myself, or to try out new things. The challenge is now on for us to continue to meet his high standards without his daily influence; if we succeed it will be because of what he's taught us. I know I speak for all of the editors working in the journal family when I say he'll be sorely missed.

If you've got something we should be writing about, or you want to write about—or if you have an idea for our off-beat December 2017 issue, then please do get in touch.

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