



# Highlights from this issue

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I hope that you can tell that I really enjoy editing *Education and Practice*. There's a lot to like about it. I get to work with some really talented authors, some very skilled editors, and of course I keep learning new things. I've written here before about the real treat—and tremendous opportunity—it is to be able to commission papers to help me understand things I'm struggling with.

I hope also that you can tell that as a generalist I see it as my responsibility to be eclectic. Or, from a different perspective, being eclectic is part of the huge fun of being a generalist. For example, I try not to look at the title of the grand rounds before I attend them—since I know that I'm always going to learn something, even if it isn't of direct relevance to my day to day work.

Leafing through this edition I'm not disappointed. I'm not involved in the prescription of insulin these days, but our excellent editor Philippa Prentice shows off her writing skills with Daniella Ellen with a great paper on the use of insulin pumps (*see page 131*). I'm struck, reading this some twenty years after I last did a diabetes clinic, how much has changed and how much is the same. Earl Weiner, an expert in aircraft cockpit safety, wrote as one of his laws: Exotic solutions cause exotic problems. An extension of this is that while

electronics and technology iron out small problems, they introduce the possibility of really large ones. Years ago, when presented in clinic with a dubious summary of insulin apparently administered over the prior 3 months, but probably composed on the journey to clinic, I'd have loved the access to the data now available. But of course this does introduce some more interesting problems. Read their article for more information; it's this month's editor's choice.

In the category 'Things I feel nervous I didn't know more about' go quite a few papers this month—so the CPD diary will be growing nicely. In my practice drug allergies are rare, or, if encountered, not of huge impact. By this I mean that I don't have to be completely certain if my patient who says they have penicillin allergy really has the allergy, because by and large they don't need that many antibiotics and so avoidance isn't burdensome. Peishan Wu, Katherine Longbottom, Rosemary Hague and Gillian Vance do a great job of challenging me to be a bit more professional about this, with a really practically useful paper on the subject (*see page 124*).

In a very different paper, Emily Garrett, Ailbhe Doherty and Gayle Hann review the recent NICE guidance on Harmful Sexual Behaviour Among Children And Young People (*see page 141*). It's a great

summary with helpful structuring of how to think about this challenging area; I found the detail of how to classify the seriousness of the behaviours—and so determine the response to them—particularly helpful.

Lastly, in this quick summary of subjects I'm pleased to know more about, Catherine Mark, Caroline Hart, Anthony McCarthy and Andrew Thompson have written about hemihypertrophy (*see page 114*). In their careful look at the literature and the guidance available they present a really helpful summary of how to manage these perplexing patients, for whom I've felt I have little to offer in the past.

It's always hard to pick out papers to write about in this Epistle because of an embarrassment of riches. I could happily write three pages for each Epistle but then that would leave less space for the real papers, so I'm going to stop very soon. However, first I would just like to recommend you take a close look at the Epilogue papers to test yourself (you could record that as CPD) and dip into the rest of the journal too. Plus, please do get in touch if you have good ideas. I try to be responsive, if I'm a bit slow, please give me a nudge. I'll just be sitting somewhere reading something fascinating, and sometimes need to be brought back to reality.

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