



# Highlights from this issue

doi:10.1136/edpract-2021-321933

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It can be really tough choosing what to write about in this section. I should clarify that this is not because there are no great papers but sometimes there are so many. This month's issue exemplifies this problem, and so rather than focus on just one or two papers, I'm going to attempt a gallop through several.

I'm intimidated by dystonia. My own management of it feels more like my very poor cooking skills. As I add the ingredient, or the treatment, the sequence runs too little, too little, too little, then suddenly too much. Eva Forman, Mary King and Kathleen Gorman present a great approach to investigation and management of dystonia—in which I'm pleased to note that they describe the treatment as 'challenging'. I will be referring back to this paper often (*see page 71*).

I really enjoyed this month's epilogue papers. I don't know if you've noticed that the online version conceals the answer from you—almost as good as the page turn we try to have before giving you the answer in the print version. I do know how hard people have

worked to continue their professional development over the past year or so, I'd strongly suggest that active engagement with these fascinating papers could form some of that, whether you're working towards an exam or just wanting to flex your brain a little.

I'm interested in how we construct our world to nurture good health. Caroline Gribbon summarises a NICE guideline on physical activity and the environment (*see page 113*). Although published well before a certain virus, it's full of good sensible advice. They're not things we can prescribe, but we have a positional authority in our society—so why not get in touch with our councillors or others who hold the power or the budget, and express an opinion.

I've been fascinated with the change in how we interpret symptoms and signs in dehydration. Early in my training we spent hours committing to memory specific signs for specific degrees of dehydration and would confidently predict a percentage. It turned out that this was quite misguided. Antonio

Prisco and colleagues do an excellent job in their paper of placing these symptoms and signs on a firm scientific basis, while pointing out both absence of evidence and evidence of absence of science for some of them (*see page 114*). I love one of the bottom lines of this paper which is what, I hope, any sensible paediatrician would internalise: 'The greater the number of symptoms and signs, the greater the likelihood of severe dehydration'. We owe it to our patients to be very familiar with this assessment, to be able to work out which ones of the many children we assess are the sickest, and then be able to express this clearly to colleagues. For this reason I'm making this my Editor's choice this month.

I hope you enjoy the journal as much as I do each time I come to write one of these; as I say it is never hard to find lots to learn and to enjoy the learning along the way.

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