



Highlights from this issue

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One of the things I enjoy about the Interpretations articles we carry in *Education & Practice* is that they frequently challenge my sloppy thinking. To be slightly fairer to myself, more often it might be over-simplification rather than sloppiness. Simplification is usually good. It is rare that my patients or their families say ‘you made that too simple for me to understand’. At the same time, in our urgent need to grasp complex issues it can be that with simplification we miss important subtleties, and a little focus and concentration can be very enlightening. Dilshad Marikar, Pratusha Babu and Miriam Fine-Goulden bring this focus to lactate (see page 167), and with it they sweep away my internalised ‘lactate bad’ assumption—formed, I think, at some point in the last ten years when I was taught by my PICU colleagues to pay more attention to some of the other numbers on the blood gas result. These authors have succeeded in reframing this learning for me, and for that reason their paper is this month’s Editor’s Choice.

Another set of assumptions—how do you manage a child who

is on a lot of steroids? Sai-Kalyani Kanthagnany and colleagues make what is, in my case, the correct assumption that I’ve not thought that carefully about this for a while (see page 130). They methodically unpack the impact on the child and helpfully summarise the emergency treatment in a helpful MCQ. They make the point that patients and carers need frequent repeat of education—I’d extend this to clinicians. Reader, I did not score a perfect 100% on my first go through the MCQ...

If you would enjoy a near-science fiction glimpse at an area which I’m sure will become more important in the coming decades, Andrew McArdle and Stephanie Menikou give a brilliant summary of proteomics and why we should try to keep up (see page 178).

Lastly, as a predominately paper-delivered journal with a 2 month print cycle we can’t respond in the same way as some other journals to a certain virus which has preoccupied many of us more than we’d ever have believed possible 2 years ago. However, this issue has some interesting papers about how people have adapted

to different facets of these times. Edward Snelson and colleagues think in a very practical way about how we might approach throat and ear infections in this era (see page 172). And then in two papers Susan Wallace and colleagues, and Hanna Lythgoe and colleagues look at the changing educational landscape (see pages 187 and 188). I’m sure you’ll all be familiar with these different levels of challenge—teaching and learning from our patients and their families, our medical students, our doctors in training, the other professionals we work alongside, and learning ourselves. The ingenuity, enthusiasm and persistence that people have shown this past while has been humbling and inspiring, and makes me optimistic that we will continue to improve the skills of people choosing to work with children.

I hope that you find something in this issue to inspire, interest or, at the very least, entertain you.

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