



doi:10.1136/edpract-2023-326561

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This month's issue has an outstanding selection of articles and I am delighted to announce the introduction of mini-series themes in our best practice section. The first of these is focused on child safeguarding, with David Lewis' editorial 'Safeguarding children: a priority' (see page 392).

This is accompanied by Helen Thomas and colleagues, introductory article 'Acute safeguarding essentials in modern-day paediatrics' (see page 394) and a follow-on article 'Neglect, unsupervised minors and modern slavery' (see page 397). The articles address the complexities and challenges in contemporary safeguarding and explores common themes, specific safeguarding concerns and highlights key pieces of relevant legislation. It aims to improve the confidence of paediatric professionals in their ability to manage different presentations of child safeguarding issues. While the articles in this series are chiefly focused on UK based practice, the basic tenant for child safeguarding is similar world-wide and therefore relevant to all our readers.

Along the same theme, Chloe Norman and Hannah Jacob provide a summary and review of child protection guidelines published by Royal College of Paediatrics and Child Health (see page 406). The guideline is unique as it includes the first national standards specifically for child protection medical assessments. The guideline aims to achieve better standardisation of care for children

and young people through auditable recommendations.

We also have an excellent article in the interpretation section. Hazel Evans *et al* provide useful guidance for 'Use of pulse oximetry as an investigative test for paediatric respiratory sleep disorders' (see page 429). The authors detail the diagnostic tools and recordings used in the diagnosis and monitoring of children with sleep disordered breathing. This is a timely publication complementing the recently published British Thoracic Society guideline.<sup>1</sup> This article is editor's choice as it is well-written, evidence-based and involves a readily available non-invasive tool which can be useful in both hospital and home settings.

Supraphysiological systemic corticosteroids are used commonly in the management of various paediatric medical conditions but are associated with several side-effects, including some specific to paediatric group. Claudine Micallef and Shveta Chana provide strategies that can help reduce these adverse effects in their brilliant article 'Recommendations for minimising and monitoring adverse effects of long-term supraphysiological corticosteroid use in children and young person' (see page 439).

The second article in the Medicine Update section discusses 'Chloral hydrate and its use as a sedative in paediatric settings' (see page 445). This again is a timely article after the recent safety update from the Medicine and Healthcare products Regulatory Agency (MHRA).<sup>2</sup> Overall, the recommendations are likely to lead to a restriction and reduction in the use of chloral hydrate in paediatric patients. However, this would create challenges as very few appropriate alternative sedating agents exist for paediatric practice. Thought provoking indeed!

There are also some excellent guideline reviews of evidence-based recommendations on 'Medical emergencies in eating disorders' (see page 410), published by the Royal College of Psychiatry and endorsed in May 2022 by the Academy of Medical Royal Colleges. Holly Pennick *et al* shine the spotlight on the difficulty in identifying critically unwell patients with eating disorders and the importance of high calorie refeeding for psychological as well as physical recovery. Katherine Elizabeth Anne Jones *et al* have provided a review on 'Epilepsies in children, young people and adults', a published guide from the National Institute for Health and Care Excellence which summarises key clinical practice areas (see page 416).

Another review article to highlight is that by Atessa Bahadori *et al* on the diagnosis and treatment of Lyme disease in children (see page 422), which provides a clinical algorithm for the management of children with suspected or diagnosed Lyme disease.

As usual, I am eager to highlight many more articles in the issue but am constrained by the word limits. I hope you would find them all useful and enjoy reading them. Thank you for supporting this journal and please do stay involved with contributions and feedback, which are very welcome.

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## REFERENCES

- 1 Evans HJ, Gibson NA, Bennett J, *et al*. BTS Paediatric sleep disorders guideline development group. British Thoracic society guideline for diagnosing and monitoring Paediatric sleep-disordered breathing. *Thorax* 2023;78:s1–27.
- 2 Medicines and Healthcare Products Regulatory Agency. Chloral hydrate, cloral betaine (Welldorm): restriction of paediatric indication. 2021. Available: <https://www.gov.uk/drug-safety-update/chloral-hydrate-cloralbetaine-welldorm-restriction-of-paediatric-indication>

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