

Pedi Press

Baylor
College of
Medicine

A Quarterly Publication of the Department of Pediatrics

Baylor College of Medicine



Vol. 10, Issue 3, Part I

Summer 2021



TABLE OF CONTENTS

DEPARTMENT WELCOMES NEW CHAIRMAN	3
FEATURE STORIES	
"Grant Funding Will Support Expansion of Public Health Services"	4
"Autism Spectrum Disorder: A Closer Look at Our Comprehensive Model of Care"	7
TRANSITIONS: PEDIATRIC TO ADULT CARE	
"Think Globally, Act Locally: Transitioning Individuals with Neurodevelopmental Disabilities"	11
DEPARTMENT NEWS: SECTIONS & CENTERS	
"Collaborative Effort Addresses Rare Vasculitis"	14
Developmental Pediatrics	
"Meyer Center Renews National Standing as Official Clinical Care Partner"	15
Diabetes & Endocrinology	
"Section Head Presents Overview and Updates"	16
Global Health / BIPAI	
"R.A.I.S.E. Symposium Held Virtually"	18
"Awards & Honors"	19
"BIPAI-Sponsored Training Announced"	20
"BIPAI/Global Health Interns Selected"	20
"Global Health Prepares New Generation of GH Clinicians"	21
Hematology / Oncology	
"Section Celebrates Faculty Achievements During 2021"	22
"Section Faculty Among BCM Recipients of CPRIT Funding"	23
"Annual Awareness Month Celebrated"	24
Tropical Medicine	
"Vaccine Development in India Continues to Advance"	25
CRIS	
"Faculty College Holds Second Graduation"	26
"Article on CRIS Virtual Workshop Receives Top Rating"	26
"Department of Pediatrics Annual Education Retreat" (announcement)	27
Children's Hospital of San Antonio	
"Section Head Provides Updates on PHM at ChofSA"	28

Front Cover: Texas longhorn cooling in summer heat, courtesy of Sherri Geyman Hendrix; editing by George Wallace Beasley

Department Welcomes New Chairman

"Dr. Gordon's vision of an academic medical center is perfectly aligned with Baylor's mission in education, research, patient care and community service. I'm looking forward to her leadership in this important role at the College."

-- Dr. Paul Klotman, President, CEO, Executive Dean, Baylor College of Medicine

"I am thrilled to welcome Dr. Gordon, a gifted physician/scientist and renowned leader, to Texas Children's. Her extensive experience and continued passion for treating patients will be a tremendous asset to our team, and enhance the health and well-being of those who entrust us with their care."

--Mark Wallace, President, CEO, Texas Children's Hospital

On October 1, 2021, the Department of Pediatrics, Baylor College of Medicine, welcomed the new Chairman and Pediatrician-in-Chief of Texas Children's Hospital, **Catherine Gordon, MD, MSc.** Her appointment was announced in April 2021 by Dr. Paul Klotman, President, CEO, and Executive Dean of BCM, and Mark A. Wallace, President and CEO of TCH.

Dr. Gordon comes to BCM/TCH with stellar credentials, having served most recently as the Chief of the Division of Adolescent/

Young Adult Medicine at Boston Children's Hospital and Director of the Boston Children's DXA (dual-energy x-ray absorptiometry) Center and Co-Director of the Center for Young Women's Health, as well as Professor of Pediatrics at Harvard Medical School.

An adolescent medicine specialist and pediatric endocrinologist by training, Dr. Gordon has led an independently funded adolescent bone health research group for almost two decades, receiving support from the National Institutes of Health, Department of Defense, and private foundations.

Her research focuses on how nutrition, activity, and sex hormones influence bone health during childhood and adolescence. In addition to her work with both pQCT (peripheral quantitative computed tomography) and DXA, she has helped establish national guidelines for pediatric densitometry measures. She is particularly interested in modifiable factors during adolescence that may impact bone health during the adult years.

Other interests include anorexia nervosa, inflammatory bowel disease, cystic fibrosis, and primary ovarian insufficiency associated with delayed puberty and bone loss. She also has an interest in the skeletal phenotype of children with the rare disease, Hutchinson Gilford Progeria Syndrome.



A graduate of North Carolina State University, Dr. Gordon received her MD from the University of North Carolina and did her Internship, Residency, and Fellowship at Boston Children's Hospital. Her graduate degree is from Harvard Medical School.

She is a member of the Sub-board on Adolescent Medicine for the American Board of Pediatrics, the Executive Committee (Board of Directors) for the Thrasher Research Fund, the Council for the Eunice Kennedy Shriver National Institute on Child Health and Human Development (NICHD),

and the American Pediatric Society Council.

She is a member of several editorial boards for medical journals and serves as an associate editor for the journals *Bone* and *Journal of Adolescent Health*.

She has a strong interest in mentoring early clinical investigators and has directed hospital-based programs to help junior faculty launch careers in clinical and translational research.

Dr. Gordon is the fourth individual, and first female, to lead the Department of Pediatrics at Baylor College of Medicine.

FEATURE STORIES

Grant Funding Will Support Expansion of Public Health Services



Childhood adversity and family stressors combined with genetic predispositions of the child may negatively impact short- and long-term health and well-being outcomes. These circumstances are considered the social drivers of health and involve numerous population health and quality-of-life sectors (healthcare, economics, education, and social services). The prevention of child abuse and neglect requires addressing many of these challenges in the circumstances in which children live. They include interventions across the social, ecological, and biological domains to interrupt risk factors and reinforce strengthening factors.

The Section of Public Health Pediatrics was created to address the complex issues involved in family and community forces that play large roles in children's health and overall well-being. The Section engages practitioners, services, and programs in a synergistic effort to reframe how children and families receive care and services throughout the community to mitigate adversities and foster resilience.



On September 28, 2021, **Dr. Christopher Greeley**, Professor and Section Head of Public Health Pediatrics, announced that the Section had received



“Through our implementation of the upWORDS program, we have learned from participating families that they need additional supportive services. This funding allows us to be responsive to families by expanding support through the addition of care coordination and navigation services.”

--Dr. Cary Cain



“I am thrilled that the Texas Department of Family and Protective Services, Prevention & Early Intervention is funding TWO new services for Harris County families – upLIFT and Family Connects – and the expansion of our upWORDS program. Since Dr. Greeley started the Section of Public Health Pediatrics in 2015, our team has been systematically working to identify needs and challenges and develop strategies to better support families in our community. This funding will allow us to serve nearly 800 families each year with parenting, maternal mental health, and early language support services.”

--Dr. Bethanie Van Horne



an award from the Texas Department of Family and Protective Services HOPES (Healthy Outcomes through Prevention & Early Support) initiative in the amount of \$4.8 million over 4 years (with a potential maximum of \$7.5 million pending annual negotiations and funds available). **Dr. Bethanie Van Horne**, Asst. Professor, and **Dr. Cary Cain**, Asst. Professor, who were instrumental in conceptualizing the project and obtaining the grant, will serve as Project Managers.

HOPES is a community grant that funds various innovative initiatives and supports for families with children aged birth to 5 years old who are at risk for abuse and neglect. Typical supports include home visitation services, parent support groups, maternal depression screening, promotion of early literacy, case management, and education for parents on various life-challenging issues. Included in HOPES grants are local collaborations with health care, faith-based

organizations, child welfare, early childhood education, and numerous community services for children and families. Started in 2014, the HOPES program serves 56 counties in Texas and will target 8768 youth/families in FY21 for services. The HOPES grants are offered under the auspices of the Texas Department of Family and Protective Services, Prevention & Early Intervention (PEI). PEI manages programs that offer free, voluntary services to families through contracted services with local nonprofits, governments, and schools that it funds. The program focuses on precluding bad outcomes by helping families and communities prevent child abuse and neglect, juvenile delinquency, runaway youth, and truancy.

The award will support the development of the **upSTART Initiative**, which involves expansion of the *upWORDS* early language development program, and the initiation of two new programs for Harris County, *upLIFT* and *Family Connects*. *upLIFT* is a brief home visitation program for women with elevated symptoms of perinatal mood disorder.

Family Connects is a universal nurse home visitation program that will be provided to high-risk postpartum families delivering at Ben Taub Hospital. Care coordinators will work with the program staff from each of these three programs to assist families with navigating support services and resources in the community.

The upSTART Initiative is intended to help ensure that Harris County families have sufficient support to provide nurturing homes and meet basic needs, which are essential to children’s healthy development and the prevention of child maltreatment.

By developing, expanding, and connecting evidence-based programs and promising practices to promote children’s health and family well-being outcomes, the focus is to reduce disparities in access to supportive resources and, ultimately, help to reduce the incidence of child abuse and neglect in Harris County. Programs and strategies will be delivered by Baylor College of Medicine (lead agency) and Texas Children’s Hospital.



Autism Spectrum Disorder: A Closer Look at Our Comprehensive Model of Care

Regardless of the type of service you provide, it is highly likely you will care for children and adolescents with Autism Spectrum Disorder (ASD) during your career.

Therefore, it is incredibly important for faculty and staff to learn about ASD, the process of screening and diagnosing ASD, how to support families following a diagnosis, treatment options, and strategies to effectively engage families and individuals with ASD.



The **Autism Program at the Meyer Center for Developmental Pediatrics and Autism** is comprised of Developmental-Behavioral Pediatricians (DBP), Neurodevelopmental Disabilities Pediatricians (NDD), Clinical Psychologists, and Social Workers. We offer a range of services for patients with ASD and their families, including comprehensive diagnostic evaluations, brief intervention services, support for families, and research opportunities.

Defining Autism Spectrum Disorder

Autism spectrum disorder (ASD) is a neurodevelopmental disorder characterized by significant difficulties in social communication and interaction, as well as the presence of restricted and repetitive behaviors, according to the Diagnostic and Statistical Manual, Fifth Edition (DSM-5; APA, 2013). Prior to publication of the DSM-5, providers could diagnose one of several separate conditions, including Autistic Disorder, Pervasive Developmental Disorder-Not Otherwise Specified, and Asperger Syndrome. Now, these terms have been collapsed into a single diagnosis of ASD.

ASD is considered a spectrum disorder because no two individuals with ASD are alike. Each individual is faced with a unique set of strengths and challenges related to social communication and interaction and challenging behaviors. Examples may include, but are not limited to, having trouble expressing needs, avoiding eye contact, difficulty understanding others' nonverbal communication, struggling to develop and maintain friendships, engaging in certain behaviors or routines in a repetitive manner, struggling to adapt to changes in routine, having very focused interests, and/or having unusual interests in or aversions to sensory aspects of the environment (e.g., loud noises, bright lights).

Screening and Diagnosing

Screening for and diagnosing ASD can be a confusing process for families and providers because, unlike other conditions, there is no medical or lab test to confirm that a child has ASD. Rather, ASD is a behavioral diagnosis, meaning it is based on observable behaviors and a child's developmental history. ASD can be reliably diagnosed by an experienced provider by age 2, and as early as 18 months in some cases; however, many children do not receive their diagnosis until age 4 or later. The American Academy of Pediatrics recommends that all children be screened for ASD during their 18-month and 24-month well-check visits or sooner if there is an immediate family history of ASD or if other behaviors consistent with ASD are present. One of the most common screeners used by pediatricians is the Modified Checklist for Autism in Toddlers, Revised, with Follow-Up (M-CHAT-R/F). If a child screens positive (i.e., elevated risk), the pediatrician is encouraged to conduct further evaluation to determine if the child meets criteria for ASD, and may refer for a comprehensive diagnostic evaluation as necessary.

Making an accurate diagnosis involves a comprehensive approach to data gathering via detailed caregiver history of the child's early development and current presentation; qualitative information from teachers and therapists if applicable; direct administration of developmental and behavioral tests to measure the child's developmental level and to assess for symptoms of ASD during the visit in a standardized fashion; and/or caregiver and teacher/therapist rating forms. Synthesis and interpretation of this information inform clinical decision-making related to whether the child has ASD and should be performed by skilled providers who are trained in evaluation of children with ASD.



During the evaluation, information obtained from caregivers includes a medical and developmental history from birth until the child's current age. This information includes when the child met certain developmental milestones in order to better understand the developmental trajectory since infancy and certain symptoms and behaviors that are

seen in children with ASD. The provider will observe the child for any ASD-related signs or symptoms and will administer a standardized test to estimate the child's current developmental level. Knowing a child's developmental level is important when considering whether the child meets diagnostic criteria for ASD. Common ASD-specific diagnostic measures include the Childhood Autism Rating Scale, 2nd Edition (CARS-2), a rating scale completed by the clinician that involves both parent interview and behavioral observations, and the Autism Diagnostic Observation Schedule, 2nd Edition (ADOS-2), a semi-structured, standardized, play-based assessment

designed to obtain information about social, communication, and play behaviors, as well as restricted and repetitive behaviors.. Through the Autism Program, a comprehensive diagnostic evaluation may be performed by a Developmental-Behavioral Pediatrician (DBP), Neurodevelopmental Disabilities Pediatricians (NDD), or a Clinical Psychologist.

After the assessment is complete, the provider shares both quantitative and qualitative feedback to the family regarding the child's developmental, cognitive, adaptive, behavioral, and socio-emotional functioning. Recommendations for school services, therapeutic interventions, supports for families, and participation in research are then provided to be utilized by the child's family and care team (i.e., medical providers, intervention specialists, educators).

Providing Interventions

It is important to help families understand the importance of seeking evidence-based intervention, one of the most well-supported of which is Applied Behavior Analysis (ABA) therapy. Through ABA, providers work with families to identify skills to teach that will be meaningful to the child and the family and can replace maladaptive patterns of behavior. They might include communication, social, leisure, daily living, and/or coping skills. Caregivers are taught how to present these skills in smaller, teachable steps, as well as strategies to positively reinforce their child's skill development and use in their everyday lives. The goal of evidence-based interventions is to build on each child's unique and diverse strengths and ensure children reach their full potential, rather than to "cure" or eliminate ASD altogether.

Our team includes Clinical Psychologists who are also Board Certified Behavior Analysts who deliver evidence-based interventions based on the principles of ABA. For example, our team offers a brief outpatient parent training for families of preschool-aged children with ASD and challenging behavior and acute crisis stabilization services for children and adolescents with ASD admitted to one of the TCH campuses. Key components of both intervention programs involve teaching parents and staff members ways to better assess and understand the function of a child's challenging behavior and developing an individualized and structured intervention plan to reduce those behaviors, as well as teach new, more appropriate and adaptive skills and behaviors. Services are offered both in-person and via telemedicine.

Supporting the Families

A child's diagnosis of ASD often is a pivotal moment for a family. Not only do parents and caregivers have to absorb the information about the new diagnosis and process their emotional response to the news, but they also have to learn how to navigate numerous systems that are likely unfamiliar to them, and they often feel "overwhelmed."

Our Autism Program has a strong multidisciplinary team that includes licensed clinical social workers who are skilled at providing support and counseling to address the emotional needs of caregivers confronting a new diagnosis, as well as educating

and empowering families to navigate complex community-based services.

The social workers reach out to most families of children diagnosed with ASD through the Autism Program and assess the family's understanding of the diagnosis and recommendations, explore family's needs and concerns, identify potential barriers to accessing services, and educate regarding next steps after the diagnosis.

For longitudinal needs, the social work team has developed an innovative approach to comprehensive education for caregivers of children with ASD and other intellectual/developmental disabilities. In 2016, the interdisciplinary team collaborated to develop a psychoeducational workshop for caregivers of children with ASD. It has evolved into a 1- to 2 ½-hour workshop that we offer at least bimonthly. The workshop addresses issues such as stress management and self-care, building a support system, accessing ABA and other therapies, obtaining special education services, benefits and financial assistance, and research opportunities.

Tips for Providers

It is important to assess the needs of each child and the family before they arrive. For instance, you might ask

- about the child's sensory needs (e.g., whether they need accommodations for loud sounds, bright lights, textures of medical gowns or equipment)
- what helps the child stay calm (e.g., playing music, arm squeezes, holding a favorite toy).
- what motivates the child
- what is helpful in structuring the child's visit (e.g., visual schedules of tasks comprising the visit, high levels of praise, getting to do a fun activity after the visit).

For some families, knowing what to expect ahead of time will be helpful in making a visit successful. For instance, creating a social story that describes exactly what to expect through both words and pictures can be useful for many families and their children with ASD.

The pandemic has led to countless challenges for professionals and families alike, but one positive outcome is that all of the programs and resources have been easily converted into a virtual format, thereby enabling us to better connect with our families from outlying areas or who lack transportation or childcare.

Educational Initiatives

During the past several years, our Social Workers have developed many educational initiatives, including:

- comprehensive community resource packets for families of children with ASD (available in English, Spanish, Vietnamese, and Arabic)
- parent-friendly “To-do” checklists summarizing after-visit recommendations
- monthly email newsletter with information about upcoming programs at our center and in the community, research opportunities, and articles of interest to parents
- educational workshops and webinars featuring speakers on topics such as behavior management and preparing for transition to adult services
- “train- the-trainer” workshops for professionals on topics related to caring for children who have ASD or other developmental disorders

Authors on the original manuscript from which this article is extracted are::

Rachel Fein, PhD, BCBA

Leandra Berry, PhD

Sadiqa Cash, PhD

Jennifer Cervantes, MSW

Dinah Godwin, MSW

Robin Goin-Kochel, PhD

Holly Harris, MD

Elizabeth Klinepeter, PhD, BCBA-D

Brenda Obe, MS

Bob Voigt, MD



Looking to the Future: Research

Research conducted through the Autism Program has focused on the clinical characterization of individuals with ASD and related genetic syndromes, treatments that target core symptoms and co-occurring conditions, and the epidemiology of ASD and its comorbidities. The Director of Research for the Autism Program and several faculty members in the Autism Program have collaborated in national, multisite networks sponsored by the Simons Foundation Autism Research Initiative to understand more about the relationships among genes, brain, and behavior in ASD. These initiatives resulted in multiple research cohorts that provide a wealth of data made accessible to other investigators. The Autism Program Research Database maintains a list of approximately 2,000 families who have consented for their clinical data to be used for research purposes and to be contacted to learn about new study opportunities. This database, which was initiated with philanthropic funds, recently transitioned into a more streamlined registry called the Research Participant Awareness List (Research PALS) that is also open to non-patient families in the community.

An archive of the past year’s newsletters can be viewed here:

<https://www.texaschildrens.org/departments/developmental-pediatrics>.

TRANSITIONS: PEDIATRIC TO ADULT CARE

Think Globally, Act Locally: Transitioning Individuals with Neurodevelopmental Disabilities

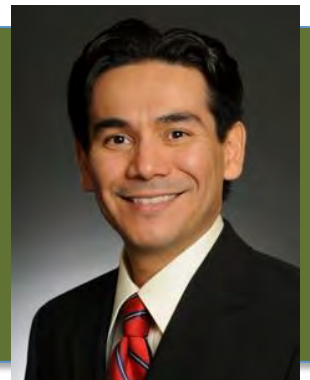
By Jonathan Castillo, MD, FAAP

The COVID-19 pandemic has reminded us that we live in a globalized community. As care providers at the largest children's hospital in the nation, Texas Children's Hospital (TCH), the pediatricians at Baylor College of Medicine (BCM) are truly engaged in a global hospital. Both its size and the depth of the expertise of these physicians and researchers allow the program to assume the responsibility to contribute to the international discourse on a number of fronts. One such sphere of service is the care of myelomeningocele across the spectrum of care.

Fulfilling our global health vision, BCM/TCH physicians who care for patients with spina bifida (SB) partnered with the Spina Bifida Association (SBA) to contribute in the writing of the international **"Guidelines for the Care of People with Spina Bifida."** This effort, involving more than 100 international experts, combined evidenced-based research with consensus methodologies to produce a comprehensive set of guidelines including "Transitions from Pediatric- to Adult-centered Care."

"As a neurodevelopmental disability with a disproportionately high prevalence among Latinos, spina bifida poses specific challenges for transition across the continuum of care for affected individuals and requires a culturally sensitive and developmentally appropriate approach. At the Meyer Center, in close collaboration with the CDC and the AAP, we aim to develop research activities and educational materials that serve the broader community, especially our care partners throughout the Spanish-speaking world. Thus, global health is intrinsically linked to developmental pediatric practice at the Meyer Center."

-- Dr. Jonathan Castillo



Globally

Around the world, nearly 300,000 babies are born with neural tube defects (NTDs) each year. However, there is now reason for some optimism, for broadly shared scientific guidance regarding the folic acid fortification of staple foods has made a positive impact on the global prevalence of NTDs. Despite the fact that fortification recommendations span the globe, recalcitrant rates of new folic-acid preventable NTD cases remain high in many nations. Additionally, even among those with robust services for children, many countries struggle to provide adequate Transition Services for young adults who need to shift to adult-centered care.

The SBA, through a cooperative agreement with the National Center on Birth Defects and Developmental Disabilities (NCBDDD) in the Centers for Disease Control and Prevention (CDC), has made these guidelines broadly accessible. Additionally, through a special open access issue of the *Journal of Pediatric Medicine and Rehabilitation*, edited by BCM faculty, these guidelines are available globally.

A new global health paradigm challenges the traditional approach that simply juxtaposes health outcomes in low-income versus high-income countries. "Blue marble health" explains the varied prevalence and related needs of care for patients



Spina Bifida Myelomening Pediatrics Team at Baylor College of Medicine/Texas Children's Hospital

with SB in developed economies, such as many in North America and Europe.

Nationally

Across these United States, as in our “blue marble world,” the number of immigrants and refugees is escalating. Immigration is a social determinant of health that can significantly affect the provision of care. Additionally, differences in language, cultural beliefs, and acculturation, as well as local professional norms and institutional resource constraints, must be taken into account when these guidelines are implemented across the planet. The SBA’s international guidelines could not come at a more suitable time, as the digital age ensures that a new generation of pediatricians both in the U.S. and abroad will have access to this evidence-based approach.

Furthermore, as the first funded site in Texas, Baylor College of Medicine has joined a research network of

clinics. The core of this collaboration is the National Spina Bifida Patient Registry (see [linked reference](#) below for additional information). With more than ten thousand participants, it is one of the largest spina bifida registries in the world. Through collaborations across the country, investigators at BCM are identifying what modifiable factors may be associated with successful transition; this may ultimately guide clinical practice to introduce interventions aimed at improving functional and educational outcomes.

Just as policy level advocacy is a core tenet of training and practice in Developmental and Behavioral Pediatrics, advocacy is part of the NTD healthcare environment. For instance, through congressional-level advocacy, those clinicians and investigators who often care for this population in the U.S. have been able to champion the related issues on Capitol Hill. Such legislative

advocacy has led to a recent congressional increase in the level of funding for the National Spina Bifida Patient Registry at the CDC. At BCM, moreover, affiliation with the SBA through a national network of “Clinical Care Partners” ensures that patient-centered outcomes will improve for years to come.

Locally

The second publication from the recent AAP/Society for Developmental and Behavioral Pediatrics (SDBP) Workforce Survey recently reported comparisons of two groups of developmental-behavioral pediatricians (DBPs). They found that compared with a 1998 group of 265 DBPs, a cohort of 368 in 2015 were older and more diverse, and had a higher percentage of female practitioners. However, fewer cared for children with physical disabilities, such as SB or cerebral palsy. Yet, the Meyer Center for Developmental Pediatrics, which has served the region for this population for more than 30 years, remains deeply committed to this population.

As an SBA Clinical Care Partner, we continue to work with clinicians not only across BCM, but also across institutions in the state of Texas. In collaboration with the UT Southwestern Medical Center and Sam Houston State University, we

recently provided continuing medical education regarding transition services to professionals attending the national meeting of the Society for Developmental and Behavioral Pediatrics. Through the American Academy of Pediatrics and a Project Extension for Community Healthcare Outcomes (**Project ECHO**), BCM faculty are now providing telementoring. This case-based virtual community of practice training and education model affords the opportunity to share what we are learning locally with medical centers across the nation.

Additionally, a dynamic partnership with the Transition Medicine Clinic at Baylor Medicine, which offers comprehensive healthcare and numerous wrap-around services, assures that the transitioned patients will have the necessary medical and social supports to continue to have the adult healthcare services across the lifespan.

In sum, at BCM we recognize that it is up to those of us currently in the care of the SB population to encourage future generations of pediatricians to develop and utilize culturally effective guidance and care, as well as to continue to advocate and care for individuals living and transitioning with physical disabilities such as spina bifida.

Got Transition recommends that the transition plan should have:

- Clearly stated transition expectations and the age for transfer to adult care in a Transition Policy.
- A medical summary, which includes a medical history, a list of medications/supplies, the care team members, etc.
- Planning for the home, insurance, and community-based services to change after 18 years of age.
- At age 14, all children with individualized school services should attend annual review meetings with the school team regarding their educational plan; these services may extend to age 21 years for some individuals who qualify.
- The decision-making support options needed when the individual turns 18. The levels of possible support are independent, supported, or guardianship.
- Assurance that the person takes on adult care after the transfer from pediatrics.

More information is available at the links below:

<https://www.aap.org/en/news-room/aap-voices/helping-those-with-spina-bifida-make-developmentally-appropriate-transition-to-adult-care/>

<https://www.healthychildren.org/English/family-life/health-management/Pages/Spina-Bifida-Helping-Teens-Transition-to-Adult-Centered-Care.aspx>

About the Author:

Jonathan Castillo, MD, MPH, FAAP is Associate Professor of Pediatrics in the Section of Developmental Pediatrics at Baylor College of Medicine in Houston, Texas, and he is a developmental-behavioral pediatrician at the Meyer Center for Developmental Pediatrics and Autism at Texas Children’s Hospital. He is Director of the Spina Bifida Program at BCM. He serves as Co-Principal Investigator in the CDC’s National Spina Bifida Patient Registry. Dr Castillo is a member of the Society for Developmental and Behavioral Pediatrics, and he is an Editorial Board member for the *Journal of Pediatric Rehabilitation Medicine*.



DEPARTMENT NEWS SECTIONS & CENTERS

Collaborative Effort Addresses Rare Vasculitis

Anti-neutrophil cytoplasmic antibody (ANCA) disease, Henoch Schoenlein purpura / IgA vasculitis, and Takayasu's arteritis are just a few of the many forms of rare vasculitis diagnosed by Baylor College of Medicine pediatric faculty every week at Texas Children's Hospital.

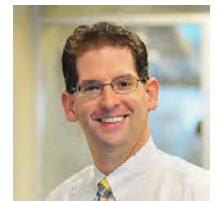
Drs. Marietta De Guzman, Assoc. Professor (Rheumatology, top left), **Manuel Silva Carmona**, Asst. Professor (Pulmonology, bottom left), **Alvaro Orjuela**, Asst. Professor (Renal, top right) and a dedicated group of colleagues have joined forces to care for children with the very challenging diagnosis of vasculitis. The new joint clinic is held on Friday mornings in Wallace Tower and provides an opportunity for the highest level multi-



disciplinary care. Patients can obtain vascular imaging, pulmonary function testing, urine sediment analyses, and kidney biopsy in a systematic and evidence-driven manner without delay. The goal is to provide early treatment for disease manifestations, implementing the latest vanguard therapies, while educating patients and their care partners in a comforting setting. Families can also meet with subspecialty nurses, dieticians, social workers, and child life specialists with specialized experiences caring for the different forms of vasculitis.



The joint venture is an extension of the combined renal-rheum lupus nephritis clinic, and an expansion upon the research collaboration that produced the 2021 publication in *Rheumatology*, "Pulmonary manifestations and outcomes in



pediatric ANCA-associated vasculitis: a single-center experience." Sayad et al. (<http://10.1093/rheumatology/keaa769>. PMID: 33355338). It supplements the strong collaborative CNS vasculitis program already being led by **Dr. Eyal Muscal**, Assoc. Professor (Chief, Rheumatology, bottom right) and many neurologists at TCH. New patient referrals can be made to the rheumatology, pulmonology, or renal services.

Meyer Center Renews National Standing as Official Clinical Care Partner

"Through the National Spina Bifida Patient Registry, BCM investigators have begun to recognize existing disparities within growing minority populations affected by spina bifida. In the US, 25% of children live in immigrant families. At the same time, Latinos are the fastest-growing demographic group. Even so, there is a lack of culturally competent clinical care and research focus on this community. Now by participating in the SBA as a recognized *Clinical Care Partner* we hope to share what we are learning regarding serving this vulnerable population through this national network."

-- Dr. Jonathan Castillo, Director of Spina Bifida Program

Last year, the Meyer Center for Developmental Pediatrics' Spina Bifida Program met the national Spina Bifida Association's (SBA) standards to become an official *Clinical Care Partner*. This recognition, which has been renewed, placed the Texas Children's Hospital program among the inaugural group of clinics from across the country that met 10 standards identified as best practices of care for individuals with spina bifida. The achievement was announced at the annual National Spina Bifida Patient Registry (NSBPR) principal investigators' meeting, which is organized and funded by the Centers for Disease Control and Prevention (CDC).

The Texas Children's Spina Bifida Program is joined by clinics with a similar mission at Boston Children's Hospital, Children's Hospital of Philadelphia, and Children's Hospital Los Angeles, among other large medical centers. The clinical standards include the ability to provide comprehensive treatment through a multidisciplinary model, a commitment to provide state-of-the-art prenatal care, and the promotion of quality improvement activities, among other core benchmarks.

The program at TCH provides innovative care through various quality-improvement efforts and clinical research that include having culturally competent care providers.

Two publications highlight the TCH Spina Bifida Program's investigation activities and growing contributions in the field. They are "Language and Latino Immigrants Living with Spina Bifida: Social Determinants of Health - The Missing Dimension in Quality of Life Research" and

"Immigration and Transition: Changing Demographics Forecast the Emerging Trends in Spina Bifida Care."

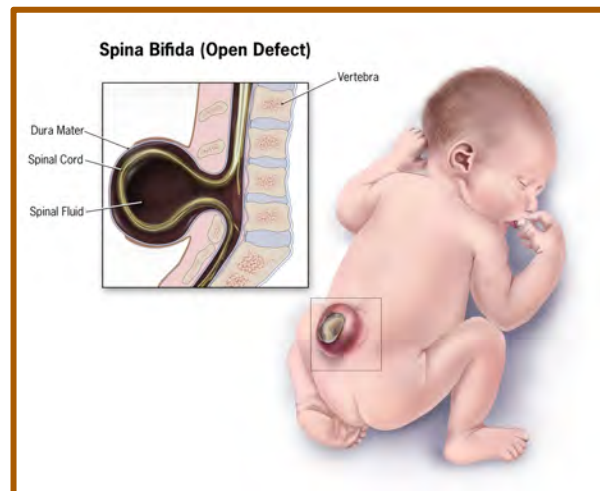
As demographics shift nationally, the need for updated evidence-based care becomes increasingly vital. BCM has been an NSBPR site since 2014, and as such emphasizes the importance of providing cutting-edge prenatal to young-adulthood focused care. To do so, the services are coordinated and integrated across

the lifespan. In this spirit, BCM faculty also provide leadership in an American Academy of Pediatrics (AAP) learning collaborative. Funded through a cooperative agreement (Grant # NU38OT000282) between the AAP and the Centers for Disease Control and Prevention's National Center on Birth Defects and Developmental

Disabilities, the "Transition from Pediatric to Adult-Centered Care for Youth Living with Spina Bifida Quality Improvement Project" is the first of its kind. (for more information on this program, see page 11)

In short, partnerships through national networks allow BCM pediatricians involved in the program to share with others throughout the nation best practices in care. They strive to create a healthier future for individuals with spina bifida throughout our global community by leading in patient care, education, and research.

Patients' stories are shared on the Center's website at <https://women.texaschildrens.org/program/texas-childrens-fetal-center/conditions-we-treat/spina-bifida-myelomeningocele>



Section Head Presents Overview and Updates

Dr. Rona Y. Sonabend, Professor and Section Head, gave an overview of the Section of Diabetes & Endocrinology during the faculty meeting held virtually on August 4, 2021. The information presented here is extracted from that presentation.

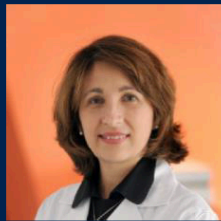
Section Programs and Faculty

The Endocrine Service has **30 physicians** and **five advanced practice providers**, who **compose four teams** that serve **in three inpatient** facilities: Main Campus (2 teams), The Woodlands (1 team), and the West Campus (1 team). In addition **to six** ambulatory centers in Houston and one in Austin, the Section oversees a 6-bed inpatient Diabetes unit (Main) and three diabetes urgent care bays (Main, West, The Woodlands).

Specialty Programs & Multidisciplinary Clinics

- Bariatric Surgery
- Conditions of Sexual Development
- Cystic Fibrosis-related Diabetes
- Endocrine Late-effects of Cancer Therapy
 - Genetic Obesity
 - Hyperlipidemia
 - Metabolic Bone
- Muscular Dystrophy
- Polycystic Ovary Syndrome
 - Prader-Willi
 - Prediabetes
- Toddler Diabetes
- Thyroid Cancer
- Transgender
- Young Adult Diabetes Program

Research Efforts

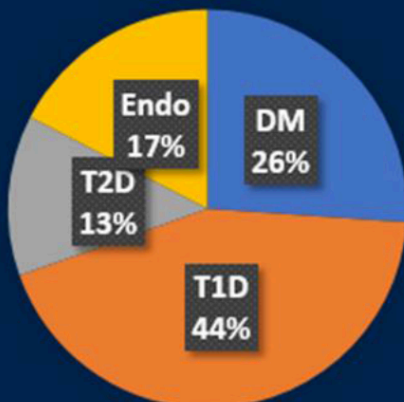


Dr. Redondo



Dr. Sisley

Funded Studies by Topic Area



The Center is the lead in three multicenter research studies, and site for more than 13 multicenter studies. This represents a 45% increase in research funding over the last calendar year, with more than 75% of funding coming from the National Institutes of Health, and more than 48% in collaborative funding.

Local Collaborators

- Children’s Nutrition Research Center
- BCM Adult Diabetes & Endocrinology
- TCH Psychology
- TCH Genetics
- TCH Gastrointestinal
- Southwest National Pediatric Device Innovation Consortium
- Rice University

The Research Program

- Annual Research Retreat
- Fellows’ Research Program
- Jr. Faculty Research Development Program
- Study Feasibility Committee
- Monthly Research Newsletter
- Quarterly Research Updates
- Visiting Speaker Series
- Writing Club, Workshop & Resources
- Website, print bochure and social media engagement

Educational Programming

The Section also boasts the largest Endocrine Training Program in the country, with two training tracks (research and clinical), 12 pediatric endocrine fellows, 5 adult endocrine fellows, more than 80 learners (MS, residents, fellows), and more than 200 didactics with 100% of the faculty participating. The team uses the latest innovative teaching methods and has 5 specialized learning curriculums.

Faculty members are the recipients of institutional education awards, are engaged in leadership positions in national educational endeavors and in institutional education, and are leaders in education innovation.

Use of Innovative Teaching Methods

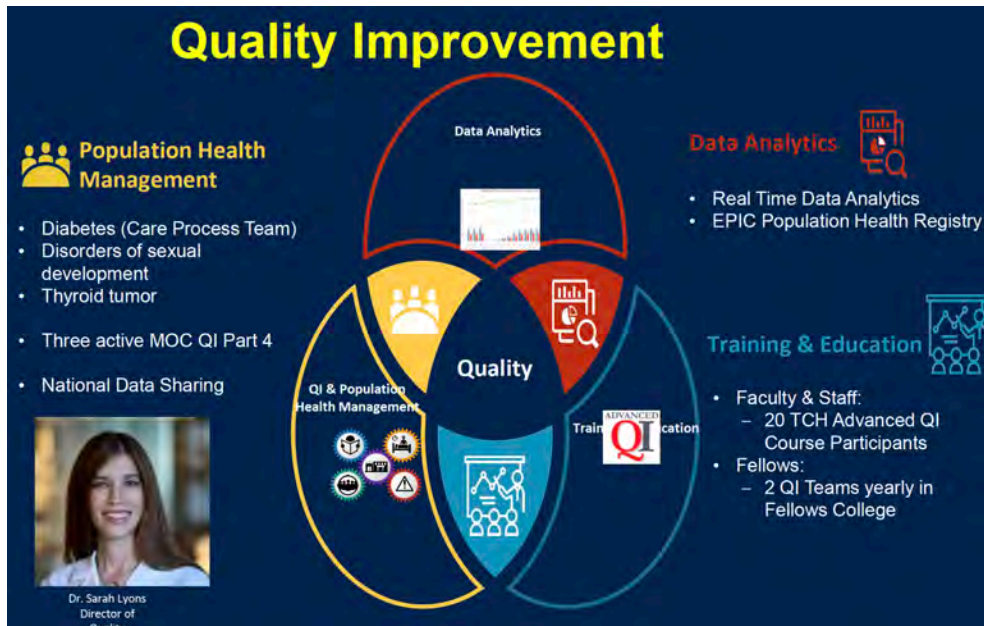
- Team Based Learning
- 5 specialized learning curriculums
- Spanning 2 year



Educational Leadership



Quality Improvement, Outcomes & Accolades



Outcomes and Accolades include for **SCHOLARSHIP**, 8 publications for 2020-2021, two authors of international diabetes standards of care (ADA and ISPAD), and 15 evidence-based guidelines; for **INNOVATIONS IN CLINICAL CARE**, 6-bed diabetes inpatient care unit and three diabetes urgent care bays; for **ADVOCACY & COMMUNITY OUTREACH**, patient and family support groups, school nurse conference, diabetes camps, and state advocacy; and for **AWARDS**, *US News & World Report* rank of #5 in the nation for 2020 and 2021.



R.A.I.S.E. Symposium Held Virtually

The Texas Children's Global Health Network in partnership with Baylor College of Medicine hosted its first-ever virtual R.A.I.S.E. (Research. Art. Innovation. Scholarship. Education) Symposium on June 28 –July 2. The theme for this year was “Forging Ahead: Maintaining Excellence Through Teamwork and Innovation.” The Symposium aimed to catalyze the exchange of ideas through a showcase of innovative abstracts and interactive sessions, enhance education and research skills through workshops, foster a culture of scholarship, and promote a holistic approach to global health through arts and wellness. As part of capacity enhancement, the Global Health Scholarship Community of Practice facilitated 20 peer coaches to support authors in preparing their abstracts for submissions. Peer coaches were also available for accepted authors to seek guidance on preparing oral presentations and E-posters.

The event kicked off with virtual exhibits featuring artistic and scholarly submissions available for asynchronous viewing.

Outstanding E-poster Presentation

PREVALENCE OF STUNTING IN THE
NUTRITIONAL RECOVERY CENTER OF
MANAURE, LA GUAJIRA, COLOMBIA
Spencer Rivadeneira, et al.
Baylor Foundation Colombia

CAREGIVERS PERCEPTION ON
PEDIATRIC LPV/R FORMULATIONS
Chacha Gesase, et al.
Baylor Foundation Tanzania

DEVELOPMENT OF A WELL-CHILD
VISIT PROGRAM
Andrea Imsen
Baylor Foundation Argentina

TUBERCULOSIS PREVENTION AND
TREATMENT
Ruth Mbwani, et al.
Baylor Foundation Tanzania

FOOD VULNERABILITY PROGRAM
Yesica Arzamendia
Baylor Foundation Argentina

VoiceThread, an online exhibit platform, enabled participants, authors, and artists to engage in discussion through the narration and comment feature.

Participants voted for their favorite arts and E-poster, which were recognized during the closing Award Ceremony. In addition, the Symposium held more than 10 hours of live programming based on the art and abstract submissions across the Network.

Scholarly works were presented in various formats such as Oral Presentation, Meet the Expert, E-Poster Live Q&A, and Mini-Workshops session. To promote teamwork and innovation, one Foundation Showcase Project selected from the Mini-Workshop session advanced into Project Incubator, an interactive session. Each Foundation collaborated among their colleagues to show-off creative problem-solving skills to push the project forward. Subsequently, Foundations regrouped to share and discuss their suggestions. Outstanding oral presentations were selected for recognition at the closing Award Ceremony.



Artwork

- **Outstanding Award: Sculpture** - Baylor Uganda Creative Arts and Crafts Skill Innovation
- **Outstanding Award: Crafts** - Pencil Holders by Tatiana Voslovan, Fundatia Baylor Romania
- **Outstanding Award: Photography** - The Photographer's Eye by Harold David Brito Ortega, Fundación Baylor Colombia
- **Outstanding Award: Drawing & Painting** - Woman by Denise-Andrea Osman, Fundatia Baylor Romania
- **Outstanding Award: Jewelry** - Baylor Uganda Creative Arts and Crafts Skill Innovation
- **Outstanding Award: Textiles** - Kitenge Fabric Products, Joan John Masimbusi, Baylor Foundation Tanzania

Abstracts

- **Outstanding Award: E-Poster** - C. Gesase et al., Caregivers Perception on Pediatric LPV/r Formulations, Baylor Foundation Tanzania
- **Outstanding Award: E-Poster** - A. Imsen, Development of a Well Child Visit Program, Fundación Baylor Argentina
- **Outstanding Award: E-Poster** - R. Mbwani et al., Tuberculosis Preventative Treatment, Baylor Foundation Tanzania
- **Outstanding Award: E-Poster** - Y. Arzamendia et al., Food Vulnerability Program, Fundación Baylor Argentina
- **Outstanding Award: E-Poster** - S. Rivadeneira et al., Prevalence of Stunting in the Nutritional Recovery Center, Fundación Baylor Colombia
- **Outstanding Innovative Oral Presentation** - A. Benson & S. Perry, Interdisciplinary Wellbeing Program
- **Outstanding Innovative Oral Presentation** - S. Perry & B. O'Brien, Third Line Program Updates and Antiretroviral Resistance Patterns
- **Outstanding Award: Oral Presentation** - R Ssebunya et al., Continuity of HIV Treatment through Community Drug Delivery During COVID-19, Baylor Foundation Uganda
- **Outstanding Award: Oral Presentation** - S Masiano et al., Adverse Childhood Experiences and HIV Treatment Outcomes, Baylor Foundation Malawi
- **Outstanding Award: Oral Presentation** - E Mugisa, Reasons for Late 1st HIV Test among Exposed Infants, Baylor Foundation Uganda
- **Foundation Showcase: Project Incubator Award** - P. Chaka et al., Improving Health Communication to HIV Patients during COVID-19, Baylor Foundation Lesotho
- **Foundation Showcase: Outstanding Presentation Award** - A. Imsen, Visual Screening Program in Children and Adolescents, Baylor Foundation Argentina
- **Foundation Showcase: Incubator Feedback Team Award** - Baylor Foundation Uganda

BIPAI-Sponsored Training Announced



On July 19th, **Dr. Anna Mandalakas** (Study PI and Global TB Program Director) was notified of \$1.4 Million USD in NIH Fogarty International Center and NICHD award funding for the **D43 training grant** “Siyakhula: Growing HIV/TB Research Knowledge for Growing Healthy Kids in Eswatini.” Dr. Mandalakas and **Dr. Bhekumusa Lukhele** (Study Co-Program Director and Baylor-Eswatini Executive Director) will work in partnership with the Eswatini Ministry of Health, University of Texas School of Public



Health, and the University of Eswatini to implement the grant.

Dr. Siyakhula will train three public health doctoral candidates in operational, clinical, and translational research focusing on HIV/AIDS and TB in pediatric populations, and two in-country cohorts of pre-doctoral trainees in applied research methods. The goal of this training program is to strengthen operational, clinical, and translational research capacity in Eswatini, while producing high-quality researchers who will successfully transition to independence, train the next generation of Emaswati scientists, and lead national efforts to end the dual HIV/TB epidemic. This project is currently being implemented and will operate through March 2026.

BIPAI / Global Health Interns Selected



Cam Huynh



Kai Lockhart

“Often times, students with means to travel internationally are those who access global health. We want to reframe this narrative and promote a broader and more sustainable understanding of global health. Global health work can be done from one’s home country, often in one’s own backyard,”

--Dr. Diane Nguyen

BIPAI / Global Health announced the 2021 Global Health Interns on September 2, 2021. The program, an extension of TCH’s and BCM’s teaching missions to open doors for underrepresented students who do not have previous global health experience, offers graduate-level students the opportunity to gain exposure and begin building a career as global health professionals. The program is open to students across a variety of academic disciplines in order to ensure inclusivity and promote candidates who are women of color.

Under the direction of **Taylor Napier-Earle**, a manager of Global Health, the internship program is administered by **Catriona Gates**, senior coordinator of marketing and communications; **Adam Gibson**, a manager of Global Health; and **Dr. Diane Nguyen**, Asst. Professor in the Departments of Pediatrics and of Education, Innovation and Technology. The program receives support from Chevron, which provides interns a paid career and educational experience.

This years’ interns, **Cam Huynh** of McGovern Medical School, University of Texas Health Science Center, and **Kai Lockhart** of LBJ School of Public Affairs, The University of Texas, were selected from more than 140 applicants, the most competitive pool in the internship’s 6-year history.



Global Health Prepares New Generation of GH Clinicians

"It's vital that physicians and learners we send to the Global Health Network sites are prepared not only with the medical knowledge to diagnose and treat unfamiliar diseases, but are also well-versed in global health ethics and principles of global health partnership, and prepared to navigate new health systems, work within resource constraints, and experience culture-shock#

--Dr. Heather Haq

Global Health completed a month-long intensive training in July for newly hired Texas Children's Global Health Corps physicians, residents and one pharmacy fellow. The course, held annually for preparation for long-term clinical placements in sub-Saharan Africa and Latin America, includes didactic lectures, interactive workshops, hands-on simulation sessions, panels, small group projects, and laboratory training. Participants also engaged in sessions to enhance their understanding of health systems, global health ethics, partnership principles, and the history of colonialism in global health. Course topics included infectious diseases, including pathophysiology, diagnosis, and treatment, and providing care for non-communicable diseases (e.g.,

cardiology, endocrinology, nephrology) in resource-limited settings. The course counts towards requirements to sit for the Certificate of Knowledge in Clinical Tropical Medicine and Travel Health examination offered through the American Society of Tropical Medicine & Hygiene.

The Global Health Corps, founded in 2005, has trained and sent more than 200 pediatricians and family physicians across its wide Global Health Network. Physicians provide clinical care, technical assistance, and mentorship, as well as helping to create curricula tailored to the structure and priorities of the local health systems in the various countries.

Section Celebrates Faculty Achievements During 2021



Dr. ZoAnn Dreyer, Professor and Clinical Director of TCH's Cancer Center Long-Term Survivor Program, was recognized by Northwestern Mutual as a female hero in the fight against childhood cancer.



Dr. Titilope Fasipe, Asst. Professor, was selected to serve on the American Society of Hematology Technical Expert Panel for Sickle Cell Quality Measures.

She also was elected as vice-chair of the Hemoglobinopathy Special Interest Group for the American Society of Pediatric Hematology/Oncology.



Dr. Ionela Iacobas, Asst. Professor and Medical Director of the Texas Children's Hospital Vascular Anomalies Center, was invited to join the Scientific Committee of the International Society for the Study

of Vascular Anomalies. The committee, which consists of 10 international experts in the field, drives the organization's scientific initiatives and oversees the scientific program at ISSVA's World Congress.



Dr. Lisa Kahalley, Assoc. Professor, was awarded a \$6.7M R01 grant from the National Cancer Institute for a large, multinational, multidisciplinary study comparing

symptom burden/toxicity, neurocognitive change and functional outcomes in pediatric brain tumor patients treated with proton vs. photon radiotherapy. Kahalley is leading this study with Dr. Donald Mabbott at the Hospital for Sick Children in Toronto and Dr. Pamela Hinds at Children's Hospital in Washington, D.C.



Susan Kirk, MSPAS, PA-C, Asst. Professor, was recognized as a Distinguished Fellow by the American Academy of Physician Assistants for her outstanding dedication to her profession.



Dr. Sharon Plon, Professor, was appointed to a Dan L Duncan Comprehensive Cancer Center Professorship. She also is co-leader of the Pediatrics Cancer Program

at the Duncan Cancer Center and Director of the Cancer Genetics and Genomics Program at TCH. Dr. Plon is director of the NIH-funded Medical Scientist Training Program at Baylor College of Medicine and serves on the NIH Human Genome Advisory Council.



Dr. Rayne Rouce, Asst. Professor, has received the **2021 Outstanding Women in Science Award** from the Association for Women in Science - Gulf Coast Houston. She was

recognized for her clinical work with pediatric leukemia and lymphoma patients and her research on T cell immunotherapy. Rouce also serves as associate dean of community engagement at BCM and has been actively involved in diversity and inclusion initiatives. She was honored at a ceremony July 7.



Dr. Michael Scheurer, Dr. Monica Gramatges and Dr. Lisa Kahalley received



a highly competitive cohort-building grant from the National Cancer Institute to study disparities in childhood cancer survivorship. They will receive approximately \$2.1 million over the next two years to understand and address factors related to disparities in adverse outcomes and access to survivorship care, specifically among Latinos.



The **St. Baldrick's Foundation-Stand Up 2 Cancer Pediatric Cancer Dream Team** has



been selected as this year's recipient of the AACR Team Science Award. **Dr. Nabil Ahmed, Dr. Donald "Will" Parsons, Dr. Meenakshi Hegde, Dr. Sujith Joseph, and Bambi Grilley** of BCM



are among those recognized. The award recognizes an outstanding interdisciplinary



team of researchers for their innovative cancer research.

Section Faculty Among BCM Recipients of CPRIT Funding

"CPRIT funding is integral to supporting the innovative cancer research happening at Baylor. Core facility awards support the work of numerous investigators, and the recruitment awards help us expand cancer research in new directions."

--Dr. Helen Heslop, Professor



The Cancer Prevention & Research Institute of Texas (CPRIT) has awarded Baylor College of Medicine more than \$20.8 million in grants to support innovative cancer research, treatment, prevention measures, and community outreach. BCM was the recipient of 11 of the 73 new grants issued to institutions across Texas, totaling more than \$142 million, to combat cancer. **Dr. Helen Heslop**, Professor and Interim Director of the Dan L. Duncan Comprehensive Cancer Center, Director of the Center for Cell and Gene Therapy, and a Dan L. Duncan Chair, noted "These funding awards align with the Dan L. Duncan Comprehensive Cancer Center's strategic priorities to expand cancer prevention, clinical trials and survivor care for medically underserved populations. We are excited about the opportunity to improve access to clinical trials for our patients at Harris Health System's Ben Taub Hospital."

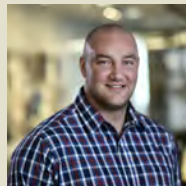
Pediatric Faculty Recipients of CPRIT Funding

Core Facility Support Awards



Dr. Michael Scheurer, Professor: "The Adolescent and Childhood Cancer Epidemiology and Susceptibility Service (ACCESS) for Texas" - \$4,000,000

High Impact/High Risk Research Awards



Dr. Jeremy Schraw, Instructor: "Exploring the Biological Basis of Ethnic and Social Disparities in Pediatric Acute Lymphoblastic Leukemia Outcomes" - \$249,999

Dissemination of CPRIT-Funded Cancer Control Interventions Awards



Dr. David Poplack, Professor and Associate Director of the Texas Children's Cancer and Hematology Centers: "Application of mHealth Technologies to Improve Latino Childhood Cancer Survivor Engagement and Use of Evidence for Personalized Follow-Up Care and Screening" - \$299,982

Expansion of Cancer Prevention Services to Rural and Medically Underserved Populations Awards



Dr. Jane R. Montealegre, Asst. Professor and Deputy Director of the Office of Outreach and Health Disparities at the Duncan Cancer Center: "Strengthening Safety Net Health Systems to Improve Cervical and Colorectal Cancer Screening and Follow-up among the Medically Underserved" - \$2,497,029

Annual Awareness Month Celebrated

September traditionally is the month during which the Section and TCH's Cancer and Hematology Center honor patients with childhood cancer, sickle cell disease, histiocytosis, or immune thrombocytopenic purpura, along with their families. It is also a time to honor the staff who are dedicated to providing these patients optimal care. This year was no exception, although some restrictions were in place due to COVID-19: social distancing was maintained for onsite celebrations and other events were celebrated virtually.

This year, the exhibition was held on the Auxiliary Bridge from August 28 through September 24. *Making a Mark®* also was hosted virtually on The Periwinkle Foundation website and featured approximately 300 works of art and creative writing. In addition to the art gallery, the Center features inspiring videos from patients, families, and staff, who share messages of encouragement and support. The TCH blog also featured selected posts throughout the month.

"Even though we continue to face challenges from COVID-19, we have a phenomenal team of providers and staff who will do whatever it takes 24/7 to ensure our patients and their families get the care and treatment they need. Every day, the staff and physicians of our Center help children fight and defeat cancer and blood disorders so they can have a better tomorrow. Please stand with us so that, together, we can create a healthier future for these children who need our care."

– Dr. Susan Blaney, Professor and Director, TCH Cancer and Hematology Center



Several activities are designed to raise awareness of the different diseases and the challenges they pose for patients, family, and care providers. One of the primary events is The Periwinkle Foundation's *Making a Mark®* exhibition, now in its 31st year. It showcases art and creative writing from patients aged 2 to 20 years who are battling cancer and blood disorders at the Center.

In addition, several activities are held specifically for the children: On September 1, the Faris Foundation held its "Let There Be Gold" carnival on the 8th floor of West Tower for patients with bone marrow transplants and again on September 2, for patients on the 7th and 9th floors. The "Let There Be Gold" ribbon tying activity was held on 5 days at the West Campus and 5 other days at The Woodlands campus.

Activities for Awareness Held in September

Sept. 1-6 Waterwall at John P. McGovern TMC Commons was lit gold for childhood cancer awareness

Sept. 3 Houston City Hall and Montrose Bridges were lit gold for childhood cancer awareness

Sept. 7-9 Houston City Hall and Montrose Bridges were lit burgundy for sickle cell awareness

Sept. 13-19 Waterwall at John P. McGovern TMC Commons was lit burgundy for sickle cell awareness

Sept. 18 Hematology team hosted Sickle Cell Education and Research Day virtually

Sept. 24 Hematology celebrated Sport Purple for Platelets day by wearing purple

Sept. 30 Gold fight Win Patient Game Day

Vaccine Development in India Continues to Advance

Corbevax, the COVID-19 vaccine developed by Biological E. Limited in India and based on the Texas Children's Hospital Center for Vaccine Development and BCM Tropical Medicine vaccine technology, under the directions of **Drs. Peter Hotez**, Professor, and **Maria**

Bottazzi, Professor, is advancing in a phase 3 clinical trial in adults.

Recently, the India regulators approved a protocol for phase 2/3 clinical trial in children and adolescents

aged between 5 and 18 years and a protocol to evaluate immunogenicity in elderly populations and those with certain risk factors.

The results of the adult Phase 3 clinical trial are expected in September or October, with a determination of emergency use authorization (EUA) by November of this year. Emergency Use Authorization would mean the vaccine could start to be administered to adults in the general public in India.

Biological E. Limited has an agreement already in place to supply the Indian government with

300 million doses by December. The company is in discussions with the World Health Organization (WHO) to determine if the results from the adult Phase 3 clinical trial would enable them to obtain a WHO emergency use listing (EUL), which would allow for the recombinant

protein-based vaccine to be deployed in low- and middle-income countries under the COVAX mechanism.

Ongoing research at the Texas Children's Hospital Center for Vaccine Development



and National School of Tropical Medicine continues to design and develop COVID-19 prototypes against variants of concern as well as research on pan-coronavirus vaccine constructs* that could provide additional weapons in the universal fight against coronavirus disease.

Additional partnerships via licensing agreements have been secured with other vaccine manufacturers including BioFarma, Indonesia's leading vaccine manufacturer. BioFarma is currently producing the vaccine pilot lots to commence clinical trials before the end of 2021.

• **Results, Conclusions, and Significance** The RBD203-N1 production process yielded 492.9 ± 3.0 mg/L of protein in the fermentation supernatant. A two-step purification process produced a $>96\%$ pure protein with a recovery rate of $55 \pm 3\%$ (total yield of purified protein: 270.5 ± 13.2 mg/L fermentation supernatant). The protein was characterized as a homogeneous monomer with well-defined secondary structure, thermally stable, antigenic, and when adjuvanted on alum and CpG, it was immunogenic and induced robust levels of neutralizing antibodies against SARS-CoV-2 pseudovirus. These characteristics show that this vaccine candidate is well suited for technology transfer with feasibility of its transition into the clinic to evaluate its immunogenicity and safety in humans.

Chen W-H, Pollet J, Strych U, et al. Yeast-expressed recombinant SARS-CoV-2 receptor binding domain, RBD201-NI as COVID-19 protein vaccine candidate. Preprint on bioRxiv doi: <https://doi.org/10.1101/2021.08.24.457518>

Faculty College Holds Second Graduation



The Faculty College, sponsored by the **Center for Research, Innovation and Scholarship in Medical Education (CRIS)**, is a one-year program designed to provide excellence in foundational principles in pediatric health professions education to serve as a pathway to education scholarship and leadership through highly interactive workshops, guidance, and educational programming. The Health Professions Education Certificate Program provides a roadmap to preparedness for core mission-critical areas within the department. It uses the POGIL (Process-Oriented Inquiry Based Learning) framework to deliver foundational content in a “ready-to-use” format. Learners go through a 3-step POGIL: Exploration, Concept Formulation, and Application. To foster a Community of Inquiry, the program uses a synergistic integration of robust learning technologies, which allows for seamless delivery of asynchronous and synchronous learning, virtual engagement for effective intellectual discourse, and collaborative and team-driven activities. The second graduation of the Faculty College was held on June 8, 2021. For names of graduates, see Part II, page 7.

Article on CRIS Virtual Workshop Receives Top Rating

On September 2, CRIS received notice that *Medical Teacher* had selected an article by **Drs. Lee Ligon, Audrea Burns, and Satid Thammasitboon** as one of the “Top-rated MedEdPublish Articles for March 2021.” The *Medical Teacher* website explains that “MedEdPublish (www.mededpublish.org) is an open access, post-publication peer-reviewed e-journal. Articles are awarded a star-rating by a review panel and readers of the journal.” The list of 20 are articles that achieved an average star-rating of three stars and above. The article, “Creating a ‘Community of Inquiry’: A Framework for Optimizing the Virtual Education Experience” (MedEdPublish, 10. <https://doi.org/10.15694/mep.2021.00007.1>) was selected from among hundreds of MedEdPublish publications. The article describes the authors’ creation, development, and presentation of the first all-day writing workshop presented virtually during the beginning of the lock-down caused by COVID-19 in 2020.



**Department of Pediatrics
Annual Education Retreat
December 3rd, 2021**

Inspired, Connected, Rejuvenated

**"Reimagining Medical Education
in the Postpandemic Era!"**

Registration & Abstract Submission

The Kelly Descioli Memorial Lecture

Teresa Chan, MD, FRCPC, MHPE, DRCPSC

Associate Dean, Continuing Professional Development Office
McMaster University, Toronto, Canada

Networking with Educators and Scholars:

The education retreat is our largest educational event, a perfect venue for you to network, learn and establish collaboration with others within educational community.

Educational Scholarship Showcase:

Submit your abstract to showcase your educational scholarship and win the recognition for your great educational work

Faculty Development Workshops:

Attend a series of 3-M certified faculty development sessions to learn from your community of educators and scholars on current hot topics in medical education



Section Head Provides Updates on PHM at CHofSA

**Vision: To deliver optimal care, excellence in education,
and integrated services that improved the lives of children**

During the Pediatric Department's faculty meeting held on August 4, 2021, Dr. Leticia A. Shanley, Section Head/Service Chief of Pediatric Hospital Medicine at the Children's Hospital of San Antonio (ChofSA), gave an update on the involvement of the section. The information provided herein comes from her presentation.

History of PHM

The Section was formed in 2013, and since that time, it has had two division chiefs in addition to **Dr. Leticia Shanley**: **Drs. Ricardo Quinonez** (2013-2016) and **Vanessa Hill** (2016-2019). The current staff is composed of 10 BCM faculty members, two PHM fellows, a care coordinator, and an administrative assistant.

ChofSA is part of Christus Health, a Catholic non-profit system, that includes more than 600

centers: community hospitals, clinics, and long-term care facilities. Christus Health currently has more than 45,000 associates and 15,000 physicians. ChofSA, which began its affiliation with BCM in 2013, is the only pediatric hospital and clinic system within Christus Health and the first free-standing children's hospital in San Antonio, Texas. It is composed of the main hospital, three multispecialty centers, two free-standing emergency departments, and five primary care clinics, and it has 202 licensed beds.



Education Provided by PHM

Education includes faculty for two PHM fellows, an ACGME-accredited fellowship (1 of 2 at ChofSA), and a 2-year BCM PHM fellowship program; faculty for 10-15 residents and medical students daily, primary inpatient pediatric training for BCM pediatric residency (39 residents) and Christus family medicine residency (33 residents), director for skills and systems rotation, and resident choice awards (Faculty Excellence in Clinical Care and New Faculty of the Year Award); and faculty for third- and fourth-year students from BCM and University of Incarnate Word Medical School.

Scholarly Activity of PHM

Scholarly Activity includes **curriculum development and evaluation** for PHM

The PHM provides in-house coverage, including IMC medical/surgical services, inpatient rehabilitation, a mother/baby unit, and sedation, as well as a Rapid Response Team, 24/7/.

Fellows core curriculum, PHM fellows procedural curriculum, BCM residency QPS curriculum, BCM residency skills and systems, and MS3 boot camp; **QI** that follows AAP Value in Inpatient Pediatrics, nurse-initiated sepsis alert, PAWS escalation pathway, and PCP discharge communication; Immigrant Health that is involved in hospitalized encounters for immigrant children; **diversity and inclusion** with BCM grant support; and **simulation center** for critical resource management in pediatric emergencies.

Quality and Patient Safety

PHM is involved via leadership and/or participation in ChofSA, Medical Director of Quality and Quality and Patient Safety Committee, Vice-Chair, as well as the Morbidity, Mortality, and Improvement steering committee, newborn quality assurance and process improvement, pediatric improvement steering committee, pharmacy and therapeutics, resident quality and patient safety committee, resuscitation committee, and other committees and teams.

PHM Primary Attending is offered for

- Cardiology
- Complex Care
- Endocrine
- ENT
- Genetics/Metabolic
- Immunology/Allergy
- Infectious Diseases
- Nephrology
- Neurology
- Pulmonology
- Rheumatology
- Consultants for surgical services

CHECK IT OUT!

**Faculty, Fellows, Residents & Staff
&
Research Features**

Are in Part II