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The Global Perspective
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American Academy of Pediatrics

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Commentary

The Global Perspective

Dr Leila Srour and her husband, Bryan Watt, work with children in Laos, treating disease and supporting the development of Laotian pediatricians to reduce childhood morbidity and mortality and to improve the lives of Laotian children (Figure). Laotian children often suffer from multiple conditions, with infectious diseases—many of them preventable by vaccination—attacking children who already are malnourished and have parasitic infestations and vitamin deficiencies. Dr Srour has expressed her appreciation for the availability of the online version of *Pediatrics in Review (PIR)*, which serves both as a source of information and as an educational resource. We are grateful for the work of colleagues such as Dr Srour and Bryan Watt and consider it a privilege to supply the online version of the journal free of charge to clinicians who work in developing countries.

The American Academy of Pediatrics (AAP) is dedicated to the health and welfare of all children, which means that concern does not stop at any geographic borders but extends, literally, to all children. A few minutes spent perusing the AAP's Web site can yield information on a broad range of international efforts, many facilitated by the Office of International Affairs and the Section on International Child Health. *PIR* shares the same perspective, realizing that our contribution to the health of children should reach as far as possible. We have extended our influence in a number of ways.

Our English language edition goes to subscribers in many countries, but many thousands of our colleagues can read our material in their own languages. Our most robust foreign lan-



Figure. Leila Srour and Bryan Watt work in Laos as clinical educators of pediatricians. Readers can gain additional insight into their work through words and photographs at www.bryanwatt.com.

guage edition, in Spanish, goes to South and Central America, Mexico, and Spain. In addition, the journal is published in Chinese, Italian, Hungarian, and Polish. Next year, we expect material from *PIR* to be published in Turkish. All of the foreign language editions require the cooperation and hard work of individuals in each of those countries.

Our Editorial Board includes representatives from the Canadian Paediatric Society and the European Academy of Paediatrics (formerly the Confederation of European Specialists in Paediatrics). We published an Italian commentary as an addendum to an article on the preparticipation sports physical examination that reported the experience in Italy with in-depth screening (*Pediatr*

Rev. 2006;27:e75). We hope to include more clinical perspectives from other countries in the future.

Although most of our authors are based in North America, we have received excellent contributions from other countries. Particularly gratifying has been the breadth of representation in our "Index of Suspicion" cases, which are submitted by readers. As of this issue, cases have been published by authors from Bangladesh, Canada, England, France, Germany, Greece, India, Iran, Israel, Italy, Malaysia, Norway, Portugal, Saudi Arabia, Spain, Taiwan, and Turkey. In addition, we have published cases from American military pediatricians based in Germany, Guam, and Japan.

As a journal produced in the United States, the content of our English language edition reflects medical situations encountered in North America. However, most of what we print is applicable to children everywhere. We are sensitive to the fact that international travel has changed the spectrum of diseases that clinicians might encounter anywhere in the world, and our articles and case reports sometimes alert readers to unusual situa-

tions that they might encounter as a result of the shrinking world. At the same time, a focus on conditions that might be rare in North America can be helpful to clinicians working in countries where those disorders are encountered frequently.

Similarly, we are aware of the need for cultural effectiveness because clinicians are more likely than ever to care for children from diverse backgrounds, some of which may be very unfamiliar.

We have tried to incorporate this dimension into our articles when appropriate, and we have significant material on cultural effectiveness in preparation.

We will continue to expand our perspective and share what we have to offer children around the world through their medical caretakers. In a very real sense, all of them are our children.

—LFN

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