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Department Continues Active Role in Fight Against COVID-19

November was an especially active time for the Department’s battle against COVID-19 among pediatric patients. Two particular highlights were the publication of an important study on results of the BNT162b2 vaccine in children aged 5 – 11 and a visit to TCH by our First Lady, Dr. Jill Biden, to encourage participation in vaccinating children ages 5-11.

For the study, which has highlights below extracted from the paper for which Dr. Flor Munoz, Assoc. Professor, was an author, TCH enrolled more patients than any other hospital for children in this age bracket to receive the COVID vaccine. The report, published in the NEJM, captured data that led the FDA to approve the vaccine for school-aged children. The exciting visit by Dr. Biden is pictured on the following pages, along with extracts from the abstract and text of the publication.
Extracts from the abstract of “Evaluation of the BNT162b2 COVID-19 Vaccine in Children 5 to 11 Years of Age, published in the New England Journal of Medicine in November, 2021:

“BACKGROUND

Safe, effective vaccines against coronavirus disease 2019 (COVID-19) are urgently needed in children younger than 12 years of age.

METHODS

A phase 1, dose-finding study and an ongoing phase 2–3 randomized trial are being conducted to investigate the safety, immunogenicity, and efficacy of two doses of the BNT162b2 vaccine administered 21 days apart in children 6 months to 11 years of age. We present results for 5-to-11-year-old children.

RESULTS

In the 5-to-11-year-olds, as in other age groups, the BNT162b2 vaccine had a favorable safety profile. No vaccine-related serious adverse events were noted. One month after the second dose, the geometric mean ratio of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) neutralizing titers in 5-to-11-year-olds to those in 16-to-25-year-olds was 1.04 (95% confidence interval [CI], 0.93 to 1.18), a ratio meeting the pre-specified immunogenicity success criterion (lower bound of two-sided 95% CI, >0.67; geometric mean ratio point estimate, ≥0.8). COVID-19 with onset 7 days or more after the second dose was reported in three recipients of the BNT162b2 vaccine and in 16 placebo recipients (vaccine efficacy, 90.7%; 95% CI, 67.7 to 98.3).
Other information from the study is extracted from the article and presented here for more information:

“The BNT162b2 vaccine (Pfizer-BioNTech) is a lipid nanoparticle formulation containing nucleoside-modified mRNA encoding the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) viral spike glycoprotein. The BNT162b2 vaccine received emergency use authorization from the Food and Drug Administration (FDA) in December 2020 for the prevention of coronavirus disease 2019 (COVID-19) in persons 16 years of age or older, with subsequent expansion to 12-to-15-year-olds in May 2021, and to 5-to-11-year-olds on October 29, 2021, on the basis of data from this trial. BNT162b2 recently received U.S. licensure for immunization in persons 16 years of age or older.”

Methods

“. . . . Herein we present the results for children 5 to 11 years of age through the cutoff date (September 6, 2021); results for children 2 to 4 years and 6 months to less than 2 years of age are not yet available. Participants will be followed for 2 years after receipt of the first dose, including monitoring for potential cases of COVID-19 and MIS-C. Participants were recruited by study site personnel. Children with no or stable preexisting conditions were eligible to participate, except those with an immunocompromising or immunodeficiency disorder, those with a history of MIS-C, or those receiving immunosuppressive therapy (including cytotoxic agents and systemic glucocorticoids). In addition, in the phase 1 study, children with a previous clinical or virologic COVID-19 diagnosis were excluded . . .

Safety

Safety evaluations included assessment of reactogenicity events reported by a parent or guardian through the use of an electronic diary for 7 days after each dose. Data on unsolicited adverse events, including confirmed diagnoses of myocarditis or pericarditis, were collected from the first dose through 1 month after the second dose. Data on serious adverse events will be collected from the first dose through 6 months after the second dose.”

. . . .

Efficacy

Vaccine efficacy against confirmed COVID-19 with onset at least 7 days after the second dose was described both in participants without evidence of previous SARS-CoV-2 infection and in all participants.

. . . .

This study describes immunization against SARS-CoV-2 infection with an mRNA vaccine in children younger than 12 years of age and documents the safety, immunogenicity, and efficacy of a COVID-19 vaccine in this population; trials of other vaccines are under way. . . . However, longer-term follow-up from this study, which will continue for 2 years, should provide clarification . . . . The data reported herein support vaccination of 5-to-11-year-old children with two 10 µg doses of the BNT162b2 vaccine. Evaluation of BNT162b2 in younger children is ongoing.”
Transitioning Pediatric Patients Living with HIV (PLWH) to Adult-based Care

The Retrovirology Clinic provides comprehensive primary and specialty medical care, as well as social services for infants, children, and adolescents living with HIV and infants exposed to HIV. Adolescents at risk for developing HIV receive risk-reduction care, including pre-exposure prophylaxis. The clinic also participates in the education of U.S. and foreign health professionals and in clinical research in pediatric HIV treatment and prevention. When the time comes for adolescents to transition from pediatric to adult-based medical care, the Division provides a detailed process, coordinated by the patient navigator, Eduardo R. Ocampo, MA.
The main goal of patient navigation in the medical setting is to assist patients in their transition from pediatric to adult-based care.

At Baylor College of Medicine / Texas Children's Hospital, the navigation process that facilitates transition for patients living with HIV (PLWH) is described in the box to the right.

Having a transition policy in place has helped dramatically reduce the number of patients who are lost to follow-up, with only one patient lost to follow-up since August 2019. Patients have provided positive feedback regarding the patient navigator role and the transition folder.

Linkage to care is a key component in transitioning patients successfully to adult care. The role of patient navigation is essential in the effective transition of pediatric patients to adult care.
In the interest of developing a department-wide appreciation for diversity, equity, and inclusion (DEI) in accordance with the values established by Baylor College of Medicine, we will be including in future issues of *Pedi Press* information and insights provided by Dr. Milenka Cuevas Guaman, Asst. Professor and Chair of the Education Committee of the Pediatric Diversity Council, and others. The committee has been working on a project called “The ABCs of DEI,” with the purpose of providing information in short and concise formats to educate the personnel in the Department of Pediatrics. At the beginning of 2021, the committee created a database of possible subjects and then prioritized them based on the entire council’s preferences. From that list, they began creating points for each topic. They invite others who want to contribute to do so. This issue features the 3 Rs of Racial Literacy.
The 3 Rs of Racial Literacy*

By Milenka Cuevas Guaman, for the Education Committee of the Department of Pediatrics Diversity Council

*Racial literacy is the ability to read, recast, and resolve racially stressful encounters.*

**READ**
*Decoding racial subtexts, sub codes and scripts*
Accurately interpret the meaning (trauma, triumph, transcendence) of actors and actions in written texts, social discourse, and social interactions.

**RECAST**
*Reducing stress using racial mindfulness*
Engage in racial socialization to reduce/recast/reframe the negative impact of racial stress (from overwhelming to navigable) and build racial self-efficacy (confidence).

**RESOLVE**
*Negotiating toward a healthy conclusion*
Assertively communicate affection, protection, correction, and connection by engaging in relaxation, storytelling, journaling, debating, and role playing.

References:
*Modified from THE RACIAL EMPOWERMENT COLLABORATIVE.*
Signing Ceremony Held to License Vaccine Technology

“We’re profoundly excited to embark on this collaboration. It has an important purpose, to vaccinate Indonesia, one of the world’s largest nations. But even beyond this important mission is the prospect of expanding these activities across Southeast Asia, and ultimately all of the world’s OIC [Organization of Islamic Cooperation] Muslim majority countries.”

-- Dr. Peter Hotez, Dean of the BCM National School of Tropical Medicine and Co-Director of the TCH Center for Vaccine Development

“This signing ceremony is very important for our vaccine center. It is an opportunity for our scientists to share knowledge and contribute to building stronger vaccine development capacity in Indonesia.”

-- Dr. Maria Elena Bottazzi, Associate Dean of the BCM National School of Tropical Medicine and Co-Director of the TCH Center for Vaccine Development

On September 21, 2021, a large delegation of Indonesian government officials gathered in Houston to witness the signing of numerous agreements between the Indonesian pharmaceutical Company BioFarma and Baylor College of Medicine Ventures. The delegation included the Minister of Foreign Affairs, the Vice Minister of State Own Enterprise, the Vice Minister of Health, the Head of the National Agency of Drug and Food Control, the Ambassador Designate, and the Consul General of Indonesia. BioFarma was represented by its Chief Executive Office, Mr. Honesti Basyir. In speaking to the gathered dignitaries, Mr. Dan DiPrisco, Executive Vice President of TCH, noted the urgent need for a safe, streamlined, low-cost vaccine to help fight the world’s battle against the COVID-19 pandemic. “This vaccine technology represents the best chance of delivering a safe, effective, and scalable vaccine in the world,” he said. For more information, see Pedi Press, Part II, pages 13-14.
Botswana / Global Health Partnership Affirmed

“We see this partnership growing from strength to strength and continuously benefiting the most vulnerable in Botswana. Together, we can improve the healthcare service delivery in Botswana and the region.”

-- President Mokgweetsi Masisi, Republic of Botswana

In September 2021, BIPAI/TCH affirmed the Global Health partnership with the Republic of Botswana during a recent visit from President Mokgweetsi Masisi and a delegation of Botswanan leaders. Joining them was Dr. Mogomotsi Matshaba, Executive Director of the Botswana Baylor Trust.

The Botswana-Baylor Children’s Clinical Centre of Excellence Trust, along with TCH and BCM, operates through a public-private partnership with the government of Botswana. The Trust was launched in 2003 to establish the first pediatric HIV/AIDS Center of Excellence in Africa, at Princess Marina Hospital in the capital city of Gaborone.

Today, more than 7,500 children, adolescents, and families receive state-of-the-art pediatric care for HIV, cancer, and blood disorders, at no cost to the patient’s family. The program trains and develops local healthcare workers in emergency medicine and critical care. During the COVID-19 pandemic, TCH was able to donate supplies and personal protective equipment to Botswana.

Mark Wallace, CEO of TCH, noted that he was excited about expanding the partnership and working in the southern African nation for generations to come.
The Global Health Scholarship Community of Practice Program, in collaboration with the Center for Research, Innovation and Scholarship for Medical Educators (CRIS) has been offering a writing workshop for Global Health educators and faculty involved in a special project under the leadership of Dr. Diane Nguyễn. The workshop, given by Drs. Lee Ligon, Satid Thammasitboon, and Diane Nguyen, began in October and had four virtual sessions between October 14 and December 2, 2021. Attendees included faculty in Eastern Africa, South Africa, Romania, Argentina, and Colombia, as well as Houston.

The workshop’s content is based on writing seminars originally written and given by Dr. Ligon, with Dr. Thammasitboon joining her in 2016. In addition to presentations and workshops, they gave (with others) an all-day, off-campus workshop in 2018 (resulted in publication) and probably the first writing workshop given via Zoom due to COVID, given in 2020 (resulted in publication). Each session has an accompanying take-home manual that includes the presentation and additional articles and templates for the participants’ further educational pursuits. Many of the attendees of this virtual workshop are collaborating on a special issue of a Springer journal that will focus on their experiences in their respective countries. Resources for the workshop and other activities, including video recordings of the earlier sessions, are maintained by Dr. Nguyen and accessible by joining the Global Community. For more information about joining the workshop, even at this late date (each session is a stand-alone, so participants can still gain helpful insights), contact Dr. Nguyen at Diane.Nguyen@bcm.edu.

Mike Mizwa Receives Global Health Heroes Award

Mike Mizwa, CEO of the Baylor International Pediatric AIDS Initiative at Texas Children's Hospital, was one of the Global Health Heroes honored at the Medical Bridges 20th annual One People, One World Gala, held December 9, 2021, in the Texas Medical Center. The organization’s mission is “to bridge the healthcare gap worldwide by procuring and distributing medical equipment and supplies to underserved communities.” It began when Dr. Brock, Dr. Goetz, and Hayne Blakely, along with generous donors, established the first medical reallocator to divert and connect valuable medical surplus to under-resourced healthcare facilities in El Salvador and worldwide.

Recipients of the Global Health Heroes Awards, pictured with Walter Ulrich, President and CEO of Medical Bridges, Inc., center.

Workshop Prepares Participants to Write for Special Journal Issue

The Global Health Scholarship Community of Practice Program, in collaboration with the Center for Research, Innovation and Scholarship for Medical Educators (CRIS) has been offering a writing workshop for Global Health educators and faculty involved in a special project under the leadership of Dr. Diane Nguyễn. The workshop, given by Drs. Lee Ligon, Satid Thammasitboon, and Diane Nguyen, began in October and had four virtual sessions between October 14 and December 2, 2021. Attendees included faculty in Eastern Africa, South Africa, Romania, Argentina, and Colombia, as well as Houston.
Rarely do we see or hear the term "elimination" in a positive light within the global health space.

Today, the World Health Organization (WHO), on the heels of World AIDS Day, announced Botswana as the first and only "high burden" country to reach the "silver tier" milestone for ELIMINATION of mother-to-child transmission of HIV (EMTCT). This remarkable milestone signifies Botswana's mother-to-child HIV transmission rate is under 5%; provision of antenatal care and antiretroviral treatment to more than 90% of pregnant women; and achieving an HIV case rate of fewer than 500 per 100,000 live births.

This achievement, in the country with historically one of the highest HIV prevalence rates in the world. This achievement, in the country where in 2001, then Botswana President Festus Mogae famously pronounced to the UN General Assembly in New York City... "We are threatened with extinction."

In response to the report, Mike Mizwa, CEO of BIPAI, sent the following words of congratulations:

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This achievement, in the country with historically one of the highest HIV prevalence rates in the world. This achievement, in the country where in 2001, then Botswana President Festus Mogae famously pronounced to the UN General Assembly in New York City... "We are threatened with extinction."

Congratulations and a special thank you to Dr. Mogo Matshaba and his team at Botswana-Baylor, the Botswana Ministry of Health & Wellness, BCM & TCH global health leaders (past & present), and the countless individuals, organizations, donors and stakeholders that contributed to this milestone.

Please join me in a celebratory toast to the Republic of Botswana, Botswana-Baylor, Texas Children's Hospital and Baylor College of Medicine.....

Pula, Pula, Pula!!!
Dr. Robert Voigt, Professor and Chief, reviewed highlights for the Division, beginning with the formation of the Leopold L. Meyer Center, an outgrowth and expansion of the Development Clinic, which opened at TCH back in 1960. Initially a Mental Retardation Clinic awarded by the state of Texas to provide medically directed diagnostic and social services to children with intellectual disabilities, the Clinic was rededicated in 1973 and renamed the Leopold L. Meyer Center for Developmental Pediatrics by the TCH Board of Trustees.

Since that time, the Center has continued to expand its clinical services and research and training programs. It provides diagnostic and treatment planning consultations for the full spectrum of neurodevelopmental-behavioral pediatrics, from autism, intellectual disability and cerebral palsy to ADHD, learning disabilities, and motor incoordination, including those at increased risk, such as former premature infants, children with congenital heart disease, and those at risk due to adverse childhood experiences.

Recently, the Meyer Center and the Autism Center merged into a single Meyer Center for Developmental Pediatrics and Autism. The Center includes faculty from Psychology (Drs. Leandra Berry, Rachel Fein, Sadiqa Cash, and Robin Kochel) and Neurology (Dr. Mirjana Maletic-Savatic).

Among the clinical accomplishments of the Meyer Center for Developmental Pediatrics & Autism during the past decade are the reduction of time on wait lists, including a decrease in the wait on the Autism Clinic list from more than 3 years to only 3 to 6 months for children younger than 3 years of age. Dr. Voigt also noted specific accomplishments of different faculty members with regard to new clinics, as seen in the side bar.
Dr. Voigt also reviewed a decade of **Educational Accomplishments** from 2010-2021. These include numerous local, regional, national, and international visiting professorships, grand rounds, continuing medical education presentations, and workshops, including numerous education workshops at the annual meetings of the Society for Developmental and Behavioral Pediatrics.

**Drs. Sherry Vinson & Sarah Risen**  
Established and Lead the Neurodevelopmental Disabilities Residency  
(one of only eight nationally)

**Drs. Holly Harris, Noel Mensah-Bonsu, Sonia Monteiro, Adiaha Spinks-Franklin, Robert Voigt**  
Established and Leads the Developmental and Behavioral Pediatrics Fellowship Program  
(one of only a few DBP programs to match every year)

**Drs. Katy Ostermaier, Noel Mensah-Bonsu, Sonia Monteiro**  
Redesigned the required block month experience in Developmental and Behavioral Pediatrics

**Jennifer Cervantes, LCSW**  
“2019 Field Instructor of the Year” award from the University of Houston, Clear Lake  
“2019 Annual Showcase of Education Scholarship Presentation Award,” BCM  
“2018 Educational Research Presentation Award,” BCM Department of Pediatrics Annual Education Retreat

**Dinah Godwin, LCSW**  
Co-Chair, Society for Development and Behavioral Pediatrics Advocacy Committee

**Dr. Noel Mensah-Bonsu**  
Co-Chair, Society for Developmental and Behavioral Pediatrics Education Committee

**Dr. Sonia Monteiro**  
Best Poster for 2019 BCM Annual Showcase of Educational Scholarship Committee  
Cardiology Neurodevelopmental Outcomes Conference Program Committee

**Dr. Lisa Pham**  
Directs the BCM/TCH site of the  
Society for Developmental and Behavioral Pediatrics International Collaborative Office Rounds  
(in collaboration with sites in Pakistan, India, and Cleveland)

**Dr. Renee Rodrigues-D’Souza**  
Chair, Texas Pediatric Society Committee on Children with Disabilities

**Dr. Adiaha Spinks-Franklin**  
Board of Directors, Society for Developmental and Behavioral Pediatrics  
Executive Committee of the American Academy of Pediatrics Section on Developmental and Behavioral Pediatrics  
American Board of Pediatrics Developmental and Behavioral Pediatrics Subboard

**Dr. Robert Voigt**  
Board of Directors, Society for Developmental and Behavioral Pediatrics  
Co-Chair, Society for Developmental and Behavioral Pediatrics Section on Fellowship Training  
Program Chair, American Academy of Pediatrics Developmental and Behavioral Pediatrics Program  
Newsletter Editor, American Academy of Pediatrics Section on Developmental and Behavioral Pediatrics  
Editor-in-Chief, American Academy of Pediatrics textbook,  
*Developmental & Behavioral Pediatrics*, 1st and 2nd editions  
Chair, American Board of Pediatrics Developmental and Behavioral Pediatrics Subboard  
Primary author, Entrustable Professional Activities for Developmental and Behavioral Pediatrics Fellowship Training  
Society for Developmental and Behavioral Pediatrics Representative to Council on Pediatric Subspecialties
DiaBesties Holds 5K Run/Walk to Support JDRF

By Dr. Yuzhen "Lynda" Lin

Juvenile Diabetes Research Foundation (JDRF) is the world’s largest nonprofit funder of type 1 diabetes (T1D) research. JDRF One Walk, the largest T1D event in the world, is held annually to raise funds for scientific research to better treat, prevent, and ultimately cure type 1 diabetes.

DiaBesties (≠Diabetes) is a group of recreational runners in the Division of Diabetes and Endocrinology who practice what we preach. We have also raised funds to support our patients with T1D through various events. In May 2021, DiaBesties held our first 5k fun run/walk to celebrate the 100th anniversary of the discovery of insulin (feature story in 2021 Spring Pedi Press). The event raised the funds that are being used to support youth and families with diabetes who receive their care at Texas Children’s Hospital diabetes center.

Partnering with Texas Children’s Hospital - One Team captain of the 2021 JDRF One Walk, Sarah Kelly, DiaBesties held a 5k fun run/walk to support JDRF’s mission to end T1D on November 6, 2021.

This was the Division’s second outdoor group activity since the start of the pandemic and was regarded as both a FUN-raiser and FUND-raiser. The event was very well attended and included the patients with T1D, dietitians, CDCES (certified diabetes care and education specialists), endocrinology fellows, faculty, and their families as well as lovely pets. Special kudos to our youngest walker who was only one year old.

Together, we walked to power more research, enable more advocacy, and fund more support for the 1.6 million Americans living with T1D. If you would like to support JDRF, scan the QR code on our special bib for the walk. All proceeds will go directly to JDRF.
The Division of Diabetes and Endocrinology hosted the 3rd Annual Pediatric Endocrinology and Diabetes Research Retreat, on October 28, 2021. The program was held virtually and co-chaired by Dr. Serife Uysal, Asst. Professor, and Dr. Mustafa Tosur, Asst. Professor.

In her opening remarks, Dr. Rona Sonabend, Assoc. Professor and Division Chief, welcomed the attendants and applauded the spirit of collaboration, collegiality, and dissemination in research under the leadership of Dr. Maria J. Redondo, Professor (right, top), and Dr. Stephanie Sisley, Asst. Professor (Nutrition) (right, bottom).

Dr. Redondo, the Director of Research for the Division of Diabetes and Endocrinology, next provided an overview of the research programs and activities of the Division in 2021. They include the Faculty Research Support Program, Research Feasibility Program, Fellows Research Program, monthly Division Research Newsletters, Guest Speaker Series, up-to-date Research Website, Writing Club, and Manuscript Writing Workshop.

The Division doubled external research funding with more than $1,200k funded by NIH, and showed a continued increase in the number of publications in 2021.

* edited slightly for consistency with format
We also were honored by the presence of Dr. Katherine King, Assoc. Professor and Associate Vice Chair of Research for the Department, who encouraged eligible investigators to take advantage of departmental opportunities including Texas Children’s Pilot Award and Young Investigator Publication Award.

In the second part of the retreat, investigators presented a year-in-review update for their individual studies as well as shared their next steps. Speakers of the session were Dr. Daniel DeSalvo, Assoc. Professor, Dr. Siripoom McKay, Asst. Professor, Dr. Tosur, Dr. Marisa Hilliard, Assoc. Professor (Psychology), Dr. Redondo, Dr. Rebecca Aguirre, Asst. Professor, Dr. Sisley, Dr. Fida Bacha, Assoc. Professor, Dr. Katherine Hwu, Asst. Professor, Dr. Samantha Carreon, Instructor (Psychology), and Dr. Alfonso Hoyos-Martinez, Asst. Professor.

The Retreat’s keynote speech entitled, “Everything is Awesome: Effectively Disseminating and Taking the Credit for Your Work,” was given by the guest speaker, Dr. Linda A. DiMeglio, Professor and Chief of the Division of Pediatric Endocrinology at Riley Children’s Hospital for Children and Indiana University School of Medicine, Type 1 Diabetes TrialNet Publication Committee Chair, and Associate Editor of Diabetes Care. Given her rich experience as reviewer and editor, she shared many practical tips in the publication process. She quoted Sir Francis Darwin who said, “In science the credit goes to the (person) who convinces the world, not to the (person) to whom the idea first occurs,” while explaining the critical importance of defending one’s own ideas and convincing peers. She suggested the orders of Methods (with references), Figures/Tables, Results (text), Introduction, Discussion (with references) and lastly abstract in manuscript writing.

The retreat concluded with a session entitled, “How to Increase Quantity and Quality of Publications in Our Section,” which provided a platform for an interactive discussion among the faculty and fellows in the Division of Diabetes and Endocrinology.
New Service Initiated for Recently Arrived Immigrant Children with Special Healthcare Needs

The Program for Immigrant and Refugee Child Health (PIRCH) has partnered with the TCH Primary Care Practice at Palm Center (Division of Academic General Pediatrics) to offer primary care services and facilitate access to subspecialists during a newly arrived child’s transition to the U.S. The service is available for newly arrived children with chronic medical conditions.

The goal is to efficiently connect these children to the subspecialists they need as soon as possible after arrival in Houston, recognizing that they have likely experienced delays in care in their home country and/or through the process of relocation. In addition, the Palm Center will serve as their initial medical home, with an open invitation to continue once the transition is complete or transfer primary care services to a medical home more convenient to their new residence.

PIRCH and the Primary Care Practice at Palm Center are thrilled to be able to contribute to improved access to and quality of care for this at-risk population of children.

For additional information, please contact Dr. Karla Fredricks at karla.fredricks@bcm.edu.

[Of note, the service is currently open only to children with health insurance coverage.]
Since 2013, **Dr. Henry Welch**, Asst. Professor, has worked in Papua New Guinea (PNG) as a lead implementer of work on tuberculosis in partnership with the PNG National Department of Health and The University of Papua New Guinea’s Medical School.

With financial support and implementation input from ExxonMobil, Dr. Welch and his team have provided teaching opportunities and training of healthcare workers to sustain the impact of tuberculosis (TB) across the southwestern Pacific country. These efforts often consisted of developing and delivering lectures, writing exam questions, and providing hands-on clinical practice that provides for the nation’s physicians to better diagnosis and treat TB within the country. They eventually were able to hand over many of their responsibilities in 2018.

Part of their work in TB occurs at a national level, and part of it is at a local level. They travel intermittently to a place called Hela Province, in the town of Tari. Exxon has been supporting the work since 2013, and in the almost 9 years there, they have had a chance to see some of the impact. For example, they did the first malnutrition training, and now they are witnessing how that teaching is being incorporated into practice. They recently provided the first 3-day Child TB-HIV workshop for the province, which included lectures, bedside mentoring, and hands-on procedures. (participants pictured above)

With such incredible work accomplished over the past nine years, Dr. Welch and his team were requested to be interviewed on the longest running local radio talk show – FM 100 Talkback Show (hosted by Mr. Douglas Dimagi). Although the interview has yet to occur, this request highlights the Global TB Program’s reflection within the PNG community as a TB leader, and it further demonstrates their ability to have a robust impact in partnership with government officials and other non-governmental organizations. Dr. Welch and his team look forward to being interviewed by PNG’s FM 100 Talkback Show and continuing to provide TB technical assistance in the region.

“It seems like an insurmountable task, and it is. But the healthcare workers really care and appreciate the support. It’s a more challenging working environment than I could ever imagine, so having the chance to keep coming back, form relationships, push things forward is a great feeling.”

---Dr. Henry Welch

Work in Papua New Guinea Receives Special Recognition
Endowed Chairs and Professorship Announced

Dr. Susan Blaney, Professor and Director of Texas Children’s Cancer and Hematology Center and Chief of Pediatric Hematology/Oncology, announced the appointment of six new Endowed Chairs and one Endowed Professorship.

“I am exceedingly fortunate to be surrounded by so many talented and dedicated physicians and researchers. It is very rewarding to recognize these individuals for their years of devotion to finding a cure for children with cancer,” said Dr. Blaney. “I am also greatly appreciative of the support our Center has received from Texas Children's and from donors committed to joining us in the fight against childhood cancers and blood disorders. The research efforts of our internationally recognized faculty to cure childhood cancer and blood disorders are enhanced and accelerated by this incredible support.”

For more information, see Pedi Press, Part II, page 7.

Dr. McClain Honored with Donor Plaque

On November 11, 2021, Dr. Susan Blaney, Chief of the Division of Hematology-Oncology, unveiled a donor plaque recognizing Dr. Kenneth and Sandy McClain’s generous donation to support the Histiocytosis Program. Dr. McClain has devoted his career to finding cures for children and adults with rare histiocytic disorders. Having recognized the unmet needs of patients with rare diseases, he supports research as the only way to improve outcomes for these patients. When he joined BCM/TCH in 1986, he began an effort to develop and run a translational research laboratory. Today, the Histiocytosis Program includes more than 25 dedicated researchers and scientists funded by more than $20 million in NIH and foundation grants, as well as long-standing support from advocacy and family groups including the HistioCure Foundation. The Program sees more than 150 patients each year, including patients from around the world. As part of Dr. McClain’s vision, discoveries made at the research bench have fueled national clinical trials testing promising therapeutic strategies for histiocytic disorders. This honorary plaque recognizes his dedication and relentless goal to cure every patient and renders him now a prominent fixture at the entrance of the TXCH Histiocytosis Lab, inspiring the next generation of researchers to keep working until we discover a cure for every patient.
Hospice & Palliative Medicine

Under the direction of Dr. Tammy Kang, Professor and Division Chief, the Pediatric Advanced Care Team (PACT) is interdisciplinary, comprised of attending physicians, physicians in training a nurse, chaplain, social worker, grief and bereavement specialist, nurse practitioner, and administrators who work together to provide excellent palliative care to patients.

The PACT team is available 24 hours a day, every day of the year, to provide care in inpatient and outpatient settings, in partnership with other healthcare providers. Pediatric Palliative Care provides an additional layer of interdisciplinary support for patients and families with chronic, complex or life-threatening illnesses.

Palliative Team Celebrates Halloween

The Pixar Palliative Care Team wished everyone a Happy Halloween!

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The PACT team is available 24 hours a day, every day of the year, to provide care in inpatient and outpatient settings, in partnership with other healthcare providers. Pediatric Palliative Care provides an additional layer of interdisciplinary support for patients and families with chronic, complex or life-threatening illnesses.
New Consult Service Added

The Division of Pediatric Hospital Medicine has announced a new service for **inpatient consultation of adult patients** admitted to Texas Children’s Hospital. Medicine-Pediatrics or Internal Medicine trained hospitalists to provide the adult care for patients aged 22 years and older with nonurgent concerns who are admitted to inpatient units.

Formerly part of the Division of Pediatric Emergency Medicine, the Division was created in 2010, from the existing faculty inpatient service at BCM/TCH.

Under the direction of Dr. **Ricardo Alejandro Quinonez**, Assoc. Professor and Division Head and Service Chief, the Division is a premier provider of general pediatric inpatient care at BCM-affiliated hospitals and a national leader in the practice and advancement of Pediatric Hospital Medicine.

The faculty care for hospitalized patients of more than 500 primary care physicians, as well as patients from the critical care service, inpatient transfers from outlying hospitals, and direct admissions from some emergency rooms.

The consult service began on October 13, 2021 and offers consults seven days a week from 7:00 AM to 4:00 PM. No consults are offered overnight, nor are overnight cross-coverages of patients followed by the consult service available. Also, patients actively followed by Complex Care Clinic (outpatient) or by Pediatric Hospital Medicine Complex Care Team (inpatient) are excluded, as are emergent issues.

The service helps manage non-urgent inpatient care issues and assists in the management of chronic disease for these patients. For more information about this new service please contact the Medical Director for this service Dr. Erica Delbecq at esdelbec@texaschildrens.org.

**PRIMARY EMPHASES**

- Our physicians deliver the highest quality, efficient, and compassionate inpatient care in a culturally sensitive, family-centered environment.
- We use evidence-based medicine to develop, implement, refine, and advance best practices in pediatric hospital medicine.
- Our focus for patients is facilitating seamless transition of care for discharge through communication and information transfer between the hospitalists and primary care physicians.
- Our faculty conduct on-going research and collaborate with specialists and centers of excellence to advance pediatric hospitalist medicine.
- We advocate for patient safety through quality improvement initiatives.
- Our teaching faculty excel as educators of students, residents, colleagues, and parents.
- The Division is focused on creating an enriching work environment that promotes professional development and career satisfaction and longevity for hospitalists.
On December 27, 2021, Dr. Elaine Fielder, Assoc. Professor and Director of Pediatric Residency, announced the Pediatrics and Med-Peds residents who matched into fellowship positions for 2022-2023. They are listed below:

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COVID Vaccine Allergy Clinic Addresses Specific Needs

By Dr. Carla Davis, Professor and Chief

The Texas Children’s Hospital COVID Vaccine Allergy Clinic was established in January 2021 to help support the evaluation of patients with histories of allergic reactions to the COVID-19 Vaccine or a histories of PEG or polysorbate allergies. Dr. Sara Anvari, Asst. Professor, is the Medical Director of this Clinic.

Immediate allergic reactions have been reported after receipt of COVID-19 vaccines, including the mRNA vaccines (Pfizer, Moderna) and adenoviral vaccines (J&J), at similar rates of 2.5-4.7 cases per million doses administered. In a recent cohort study of patients with known histories of allergy, 1% had mild allergic symptoms and 0.7% had anaphylactic reactions after receiving the first or second dose of Pfizer-BioNTech COVID-19 vaccine. Patients with known histories of allergy are more likely than those without histories of allergy to have such reactions. Allergic reactions are usually caused by inactive ingredients such as polyethylene glycol (PEG) or polysorbate 80, which are contained in many vaccines, drugs, and cosmetic products.

Since its inception in Jan 2021, the TCH COVID Vaccine Allergy Clinic has evaluated more than 100 patients, all of whom have successfully received their COVID vaccine. This evaluation is based on the patient’s clinical history and skin testing to polyethylene glycol 3350 (PEG 3350) and/or polysorbate 80. An oral challenge, known to be the gold standard for diagnosing drug allergies, was performed using PEG 3350 (i.e., Miralax) in order to rule out a PEG allergy. After a successful oral PEG challenge, patients were scheduled to receive their COVID vaccines the same day and observed 30-60 minutes following vaccination.

In addition to her COVID Vaccine Allergy Clinic, Dr. Anvari has been actively collaborating with national COVID Vaccine Allergy Centers in Boston (MGH/Harvard) and Nashville (Vanderbilt), publishing work related to COVID vaccine allergic reactions and PEG allergies. Her work includes a publication in the New England Journal of Medicine demonstrating that delayed large local reactions (aka COVID arm) from the mRNA COVID vaccine was not a contraindication to receiving the 2nd vaccine dose. Additionally, she has recently published data showing the safety of the mRNA COVID vaccine in patients with a prior history of PEG-asparaginase hypersensitivity. Furthermore, Dr. Anvari has provided guidance to providers at the TCH Vaccine Clinics to help facilitate their decision on whether or not a patient should receive the COVID vaccine. She also has been actively serving as a COVID vaccine expert on the COVID Vaccine Mandate Review Group for the United States Olympic and Paralympic Committee (USOPC).

Several studies have now shown that use of prescreening, testing, and prophylactic measures can enable the safe administration of COVID-19 vaccines in the vast majority of people.


On September 21, 2021, the IAR Division celebrated the birth, life, and legacy of David "The Bubble Boy" Vetter, a Texas Children's severe combined immunodeficiency patient and the late Dr. William T. Shearer, former Chief of the Section of Allergy and Immunology and David's immunologist at TCH. Dr. Carla M. Davis, Professor and Division Head, and Ms. Carol Ann Demaret, David’s mother, were interviewed by Fox 26, on September 20, 2021, September 21, 2021 by KHOU Channel 10, and ABC Channel 13 on September 23, 2021 in honor of David Vetter “The Bubble Boy’s” 50th birthday celebration. They discussed the impact of David’s life on the world and the David Center and Clinic in the Woodlands Hospital. During its 5 years of existence, the clinic has served 15,000 children with allergy and immunology concerns.

Diagnostic laboratories in the U.S. have biennial re-accreditation inspections conducted by the College of American Pathologists (CAP). This year, the Clinical Immunology Diagnostic Laboratory reaccreditation inspection took place on September 23, 2021 and it went very smoothly and successfully. Dr. Sara Nandiwada, Assoc. Professor, has been serving as the director of the lab since 2014. This is the Fourth successful reaccreditation inspection after Dr. Nandiwada started serving as the Director of the Clinical Immunology Laboratory.

On Saturday, September 24, 2021, the Food Allergy Program Team held their 8th Annual Food Allergy Symposium virtually. Although the planned hybrid program pivoted to virtual due to the delta variant, the program reached more than 100 food allergy families and physicians on three continents, with attendees from Canada, Brazil, and Saudi Arabia. The program opened with a welcome from Dr. Shannon Allen, Beaumont ISD Superintendent, followed by an overview of the recent research advances. The other sessions were extremely well received, with Dr. Sara Anvari, Asst. Professor (pictured on p 25), speaking about COVID vaccines and allergies; Dr. Aikaterini Anagnostou, Sr. Faculty, on the new developments in food immunotherapy; and Melissa Hearrell, MSN, APRN, on oral challenges, the diagnostic test for food allergies. Ms. Amber Banken, Mental/Behavioral Health Specialist from Region 5, gave families grounding techniques for anxiety responses, and expert dietitians Jillian Davis, RD, and Emily Samuels, RD, gave nutritional food allergy tips and tricks. Food Allergy Family Network leader Mrs. Jennifer Mijangos led a session, and stories were shared by the Tran, Oldham, and Mijangos families. Ms. Indrani Maitra, a high school Teen Advisory Board member, spoke about her Allergy-Friendly Choices program with the Houston Food Bank and West Houston Assistance Ministries, helping to match allergy-friendly donated food to the food allergy families who most need these safe specialty products, with expansion to chapters throughout the country.

The Division of Immunology, Allergy and Retrovirology virtually hosted Dr. Wanda Phipatanakul on October 8, 2021. She gave the Department of Pediatrics Grand Rounds entitled, “Can Asthma Be Prevented? Strategies Tried and Logical Next Steps” She also met with Dr. Catherine Gordon, Chair of the Department of Pediatrics, and several other faculty members and fellows. The audience was engaged and very interested in the topic.
Division Addresses Domestic Violence Awareness

Editor’s note: October has been observed as National Domestic Violence Awareness month since 1981, when the initiative was launched by the National Coalition Against Domestic Violence as a Day of Unity to connect advocates for battered women across the United States. This year marks 40 years that individuals and communities throughout the nation have joined together in October in a strategic effort to raise awareness of domestic violence as a public health issue and to educate people on how they can take action to advocate for change, intervene to stop acts of domestic violence, and support those who are impacted. To those ends, Nancy Correa, Community Outreach Coordinator (pictured, right), wrote a blog that was published in October. With her permission, we are re-publishing the blog here to reach more individuals and to celebrate the work the Division is doing to address a myriad of public health issues.

Domestic Violence Awareness Month

By Nancy Correa

October is Domestic Violence Awareness Month; as a children’s hospital you might be wondering why it matters so much to us. Texas Children’s mission is to create a healthier future for children and women. In order for children to thrive, we need healthy parent, family and caregiver relationships. Domestic violence does not only harm the victim of the violence, but it has long-term negative effects on children who are exposed to and witness domestic violence. It is estimated that 1 in every 4 women will experience domestic violence in their lifetimes and over half of victims live in a home with a child under the age of 12.

Studies have demonstrated that children living in homes with domestic violence are more likely to develop emotional, social and behavior difficulties such as juvenile delinquency, alcohol and substance abuse, aggression, depression, anxiety disorders and post-traumatic stress disorder. Furthermore, approximately half of children living in homes with domestic violence will become victims of child abuse as well.

Domestic violence is a pattern of behavior used to establish power and control over someone through fear and intimidation and may include physical abuse, sexual abuse and/or emotional abuse. It often includes periods of happiness and peace, followed by tension and abuse.

Domestic violence does not discriminate and impacts individuals of all incomes, gender, race and sexual orientation. So how can we support and protect the children and parents living in violent homes in our community? Texas Children’s is working with partners across the region to prevent domestic violence and create systematic changes that reduce family stress and violence, increase parenting skills and knowledge, support resilience and healthy development of our children and strengthen family relationships. If you or a loved one are being impacted by domestic violence, help is available for you and your children. There are confidential resources available to help you understand your options and help you identify the safest option for you and your children. The National Domestic Violence hotline: 1-800-799-7233 Texas Children’s is committed to stopping the cycle of abuse and creating a healthier future for children, women and families.

For more information, visit our community partner, the Harris County Domestic Violence Coordinating Council at www.hcdvcc.org.
Dr. Muscal Addresses Recent Increase in MIS-C Cases

Dr. Eyal Muscal, Assoc. Professor and Chief, was interviewed by Fox News concerning the recent rise in the incidence of multisystem inflammatory syndrome in children (MIS-C), a condition in which various organs become inflamed. Although the exact mechanism that causes the syndrome is unknown, some experts have proposed that it is related to an inappropriate activation of inflammation pathways after exposure to or illness with mild COVID-19.

On a TCH blog, he also shared what parents need to know about MIS-C. Noting that in September the multidisciplinary team treated more than 30 patients with the condition, he explained that the syndrome has been considerably more prevalent this fall, likely due to the spread of the delta variant this summer. The average age of children impacted is 8 to 9 years. Teenagers appear to have more severe cases than those of children, but a patient of any age may require ICU care for low blood pressure or heart dysfunction.

Research conducted during the past 15 months indicates that MIS-C may be caused by an overactive immune system in response to exposure to COVID-19 or illness.

The improper immune response can occur when the immune system makes errors while making protective antibodies, thereby activating an inappropriate inflammatory response. Most children recover from MIS-C after receiving treatment with a variety of anti-inflammatory interventions. These may be a combination of intravenous corticosteroids, intravenous immunoglobulins and/or biologics. Most children develop hypotension and myocarditis and may require care in an ICU. Only rarely does the illness lead to death.

Symptoms of MIS-C include fever, GI symptoms, conjunctivitis, or skin rash. They may complain of muscle pain, have diminished eating or drinking, and have fatigue. If the heart is involved, the child may experience chest pain and/or have difficulty breathing. Symptoms usually present 3 to 6 weeks after a mild case of COVID-19 or exposure to it. Because not all children with MIS-C exhibit the same symptoms, it is important for parents to call their pediatrician immediately if they see these symptoms in their children. Also, physicians should be vigilant of emergency warning signs. This information is extracted from Dr. Muscal’s blog, which has more information and can be read in its entirety at https://www.texaschildrens.org/blog/what-parents-need-know-about-multisystem-inflammatory-syndrome-children-mis-c.
Tropical Medicine Researchers Featured in "Herminthology"

In late November and early December, the social media initiative "Herminthology" featured the women faculty and researchers of Baylor’s National School of Tropical Medicine and the Division of Tropical Medicine.

The initiative, which profiles women parasitologists in various stages of their career on Facebook, Instagram, and Twitter, published a series of profiles showcasing the work of Texas Children’s Hospital Center for Vaccine Development director Dr. Maria Elena Bottazzi; Dr. Cristina Poveda; researcher and student Maria Jose Villar; Dr. Kathryn Jones; Dr. Jill Weatherhead; and Dr. Eva Clark.

“We’re thrilled that 'Herminthology' profiled our NSTM laboratory parasitology team. Herminthology, an organization led by Nichola Calvani, spotlights women all over the world working in occupations related to the study and eradication of parasitic diseases. We greatly appreciated the opportunity to showcase the expertise of our hard-working and talented group. Hopefully our profiles will encourage more young women to pursue the fascinating field of parasitology!”

The profiles are in English and Spanish and give some background on each of the parasitologists as well as some of their current research interests. See Pedi Press, Part II, pages 8-9.
The Center for Epidemiology & Population Health held a virtual seminar on December 1, 2021, on the CDC Surveillance for Multisystem Inflammatory Syndrome in Children (MIS-C) and on the experience of faculty treating patients at TCH.

MIS-C is a condition in which various organs, including the heart, lungs, kidneys, brain, skin, eyes, or gastrointestinal organs, become inflamed. The CDC notes that the causes are unknown, but that many children who have presented with MIS-C have had the virus that causes COVID-19 or been around someone else who had it. Although MIS-C can be very serious, even deadly, most children with this condition have improved with medical care. Symptoms published on the CDC website are in the sidebar, along with indications for emergency medical care.

**CDC Surveillance Coverage**

Dr. Angela Campbell, pediatrician and Medical Officer in the Respiratory Viruses Branch of the Division of Viral Diseases in the CDC’s National Center for Immunization and Respiratory Diseases discussed the CDC surveillance. Her work at the CDC includes 7 years devoted to studies of influenza antiviral treatment and antiviral effectiveness, as well as preparedness for COVID-19 virus. During the CDC’s response to the pandemic, she was responsible for overseeing the CDC’s MIS-C national surveillance system and other epidemiological studies related to MIS-C.

**Local Response and Experience**

As noted in the Division of Rheumatology’s article (see page 26), a recent rise in the incidence of MIS-C has been noted nationally and locally. Two faculty members addressed the specific issues seen by the Division and the hospital:

**Dr. Tiphanie Phillips Vogel**, Asst. Professor, treats patients of all ages with rare autoimmune disorders. Her clinical and scientific expertise in cytokine signaling contributed to a successful partnership with colleagues in TCH cardiology to develop diagnostic strategies and targeted treatment approaches for children with MIS-C.

**Dr. Sara Kristen Sexson Tejtel**, Asst. Professor and Director for the Center for Preventive Cardiology at BCM/TCH, has research and clinical expertise in preventive pediatric cardiology, including Kawasaki disease, and outcomes of congenital heart disease. She is considered a local expert on the treatment of MIS-C.

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**CDC RECOMMENDATIONS**

**Symptoms indicating the need to Contact Physician**
- stomach pain
- bloodshot eyes
- diarrhea
- dizziness or lightheadedness
- skin rash
- vomiting

**Symptoms indicating the need to Seek Emergency Care:**
- trouble breathing
- persistent pain or pressure in the chest
- new confusion
- inability to wake or stay awake
- pale, gray, or blue-colored skin, lips, or nail beds

* [https://www.cdc.gov/mis/mis-c.html](https://www.cdc.gov/mis/mis-c.html)
The 2021 Annual Educational Retreat was held virtually on Friday, December 3, 2021. It was another successful year, and the organizers were pleased to announce the three top presentations during the Educational Scholarship Showcase:

**Awarded**

**Applied Improvisation and TeamSTEPPS®2.0**  
Kasey Davis, MD (Presenter), Rachel Marek, MD, Karen Patricia, MD, MEd, Deborah Lee, MSN, RN, MPH-BC, CPON, Emma Levine, MFA, Chase Waites, MFA, and Ankhi Dutta, MD

**Biostatistics for Busy Clinicians: Developing and Delivering a Lecture Series to Improve the Statistical Knowledge of Medical Providers**  
Mark Zobeck, MD, MPH (Presenter), Casey McAtee, MD, MPH, Fatih Okcu, MD, MPH, and Pavlos Msaouel, MD, PhD

**Enabling Educators to Balance Honest Assessment with Compassion for Burned Out Learners in the Clinical Learning Environment**  
Gal Barak, MD, MEd (Presenter), Dana Foradori, MD, MEd, Barrett Fromme, MD, MHPE, Linessa Zuniga, MD, MEd, and Andrea Dean, MD
Faculty, Fellows, Residents & Staff

&

Research Features

Are in Part II