“To it, more than to anything else, I owe whatever success I have had — to this power of settling down to the day’s work and trying to do it to the best of one’s ability, and letting the future take care of itself.”

Sir William Osler

Hi Everyone

This week's Departmental Acknowledgement goes to Bradley Osterman, a member of our resident staff, and is the result of my own personal journey with a patient. It is also representative of the work done each week by our house staff in their efforts to provide the best care possible for children and their families.

The patient is now a 3 year old little girl, previously entirely well, who presented to our hospital in late August experiencing for the first time a flurry of seizures. In addition to the seizures, over time while in hospital, new behavioural issues and unusual movements were noted. Much to the credit of diligent work by pediatrics and neurology she was diagnosed just 5 days after her initial presentation with a disorder that had not even been described until less than a decade ago. Basically, this disorder is the result of the body mistakenly producing antibodies against a neurotransmitter receptor in the brain and is treated by various immunologic manipulations.

Unfortunately, this little girl and her family have had an extremely difficult course (the most refractory I have seen in this disorder) and she remains in hospital currently. Various treatment interventions have failed to elicit a consistent and demonstrable improvement in her condition sufficient to enable her to return home. Furthermore, she has endured multiple complications, including the development of very problematic lung abscesses.

What Bradley did was to organize a case conference. He got together in the room physicians and health professionals from pediatrics, neurology, complex care, immunology, nephrology, and infectious disease. The child’s community-based pediatrician was also present. I counted 30 participants in this case conference.

Thirty people coming together to help one child. As per that African proverb, it really does take a village.

First, Bradley gave a succinct overview of the child's course, the underlying condition (anti-NMDA receptor encephalitis), and what is known about the outcomes of various treatment protocols. He then facilitated a discussion amongst those present regarding what we should do now. On the cusp of taking his Royal College specialty examinations in neurology this Spring, he showed that he was ready and able. Having been but one of his teachers during his residency, I was proud of him.

As a participant in this case conference, I was reminded that we do take care of the most challenging complex cases in child health. We are also blessed by being an academic community in which various disciplines representing varied expertise can bring to focus collectively their knowledge and perspective to improve the care of children. We also have amongst us trainees who continually challenge us to keep on the cutting edge.

In the end, we walked out of that room with a plan for both treatment and what markers and outcomes we would follow. We also all walked out of that room, no matter what we knew before, knowing more about this condition. Thus not only did we improve care for this child and family, but we will also bring our enhanced knowledge provided by Bradley's presentation and our discussion to help other children with this condition in the future.

Have a great weekend everyone!
Michael