



# World Federation of Paediatric Imaging

Providing a united platform to address global challenges in pediatric imaging

## Small World – the WFPI Newsletter

Volume 1, Issue 2, October 2012

### Founding Council

Our bylaws, which outline the structure and composition of the WFPI board (called “Council”), were finalized this summer. Here are our founding governors:

#### Officers:

President: Ines Boechat (SPR)

Secretary: Wendy Lam (AOSPR)

Vice Secretary: Dorothy Bulas (SPR)

Treasurer: Gloria Soto (SLARP)

Vice Treasurer: Timothy Cain (AOSPR)

#### Representative Directors:

AOSPR: Bernard Laya, Abrah Hayat

ESPR: Catherine Owens, Erich Sorantin

SLARP: Pedro Daltro, Celia Ferrari

SPR: James Donaldson, Rebecca Stein-Wexler

Africa (co-opted): Savvas Andronikou

Our thanks to previous society representatives who have worked for the WFPI since its inception.

The first Council meeting, organized by Dr. Celia Ferrari, was held at SLARP, Buenos Aires, September 8th 2012. AOSPR Council members participated remotely.



L to R: Dr. Celia Ferrari (SLARP President), Dr. Ines Boechat (WFPI President, SPR Past President), Dr. Silvia Moguillansky (SLAPR Past President), Dr. Dolores Bustelo (SLARP Past President), and Dr. Vicente Gilsanz (guest speaker, SLARP meeting).

### Update: WFPI on the World Wide Web

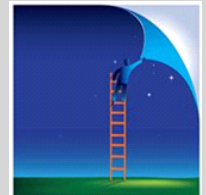


Coming soon! [Click here](#) to visit our temporary site and see how we’re doing, our bylaws, and our strategic framework.

This framework is the leadership’s roadmap for “what we want to do and why” (short summary available). It is not a vehicle for operational details or results; these can be found in our [progress report](#). We’ll be posting project-specific documents here too. Want to know more? Click here: [Strategic Framework](#).

### From Dreamers to Doers...

#### Q&A with the WFPI President



**Q:** We’ve read the strategic framework, but can you give a summary of what the WFPI’s all about?

**A:** The document you’ve read is just our initial framework. Now our foundations are laid, our dreamers are eager to become doers; our working groups are setting priorities and action is poised to begin. Only truly pro-active commitment from individuals can ensure this. Concrete work is already underway through tele-reporting in Africa. We need similar progress on other fronts.

**But at its essence, the WFPI is a mechanism to bring worldwide pediatric imaging organizations together to form one voice, one message, one network, on the need for and requirements of our sub-specialty:** education, training, research and child imaging safety. Working and advocating together is much stronger than doing it separately, and our shared platforms to date (the journal, the IPR) do not offer enough continuity or depth to our united efforts.

How we raise awareness will vary: we’re forming alliances with major players on the global health/radiology stage. We’re in discussions with the IAEA, WHO, RSNA and ACR and looking for a lead pediatric role in the ISR. But our messages must make concrete breakthroughs, and it’s up to us to make it happen. We’ll start simple, get international consensus between us on basic points and

diffuse them through tools, guidelines, studies and meetings. International, multi-center collaboration will provide better research. In lower resource settings, we'll perform clinical work through tele-radiology and deliver on-site training, thereby demonstrating how vital these services are to children's health.

## Project focus: Khayelitsha Hospital, South Africa

A WFPI/South Africa Society for Pediatric Imaging (SASPI) team has begun a tele-reading trial with a new Ministry of Health hospital in Western Cape, South Africa. The facility offers 58 pediatric beds and hosts new digital equipment but no PACS system. The staff needs short-term tele-reading support. Led by Savvas Andronikou, chair of the WFPI's Outreach Committee, WFPI/SASPI tele-volunteers read 196 films of generally good quality between early July and late August 2012.



**Raymond Nel, who runs telecommunications with the WFPI outreach group, and the radiographer team at Khayelitsha Hospital**

Given the substantial workflow, we called for further WFPI volunteers. Physicians responded from Argentina, Australia, Bolivia, Brazil, China, Cuba, Colombia, Hong Kong, India, Pakistan, Mexico, Nicaragua, Spain, Sri Lanka, the UK and the USA. There are now [40 volunteers](#), of whom 19 are active, reading for Khayelitsha and our initial project with MSF. Others, including our Spanish speakers, are on standby for the future. **Thank you!**

The next steps: setting up reporter cells, exploring research and publication opportunities on the types of disease, referral patterns, reports & tele-reading mechanisms, and providing online training for non-radiologists to interpret TB radiographs.

## Membership is OPEN!

Please note: only organizations can join the WFPI. Individuals cannot join in their own right; they belong through their societies/sub-groups. [Click here](#) for more details. We are actively encouraging national-level organizations to join us - we need your voices and grassroots reach. **Welcome!**



## Q & A with the President, continued

**Q:** Isn't it questionable to impose English as your official language? Radiology services in parts of Asia, for example, are robust and self-sufficient. They don't need to reach out to you - it's the other way round. If you ask them to speak English too....



**A:** This is a dilemma. We're working in English for now, but projects running in other languages operate otherwise. It's a simple fact that translation services are costly and we have limited resources. Furthermore, using volunteers can't always be the answer. There are availability issues and they don't always have the technical vocabulary we need. Plus there are so many languages in play. What's the solution? It's quite possible to have local groups working in different languages, then reporting to the Council in English. Many of the WFPI governors, myself included, know what it's like to work in a language that's not their own, and allowances are not always made. We'll have to operate case-by-case... but it's something we're giving a lot of thought to.

## What can YOU do?

- Join us! Membership is open.
- Participate! Let us know if you want to get involved personally in education, international representation and outreach - our progress depends on you.

**Help us to help others image worldwide. Contact: [wfpi.office@gmail.com](mailto:wfpi.office@gmail.com). Thank you for your support.**

*Thanks to Coreen Bell and Image Gently for their assistance in the production of WFPI newsletters, and to the students of the Mailman School of Public Health, Columbia University, US, for their stimulating study of (and questions on!) the WFPI.*