As Canada awaits federal policy to legalize marijuana, two CPS statements weighed the potential health effects of cannabis use in young people. **Dr. Michael J Rieder**, Chair of the CPS Drug Therapy and Hazardous Substances Committee, examined evidence for and against prescribing *therapeutic cannabis for children*, especially to treat refractory epilepsy. **Drs. Christina Grant** and **Richard Bélanger**, for the CPS Adolescent Health Committee, considered effects of recreational cannabis use on the developing adolescent brain. Urging government and the medical community to take a cautious, protective approach on marijuana policy for health and safety reasons, these writers marshaled best evidence for recommendations to protect young users, monitor health effects and limit THC content.

Speaking before a Senate standing committee last May on behalf of the CPS, **Dr. Dawn Davies** made the strongest possible case for not including mature minors in the first version of legislation to support *medical assistance in dying*. As a paediatric palliative care physician at Stollery Children’s Hospital and Chair of the CPS Bioethics Committee, Dr. Davies is involved with life and death issues every day. She favours a much wider consultation process with terminally ill or seriously disabled young people, their parents, bereaved parents and paediatric health care professionals, before extending the right to physician-assisted death to children and youth. She maintains that there may be better ways to help these young people live longer, including excellent, accessible palliative care, optimal symptom control and family support, preferably at home and in-community.

Despite decades of public health campaigns and legal controls, thousands of young Canadians still take up smoking every year. **Drs. Johanne Harvey** and **Nicholas Chadi** co-wrote a *statement* and a *practice point* on smoking prevention and cessation, published in May in *Paediatrics & Child Health*. They highlight big problems—such as the popularity of e-cigarettes and alternative tobacco products, and particularly high smoking rates among sexual minority and Indigenous youth—but offer solutions, too. Some interventions have proven effective with adolescents, including brief counselling, psychological support, nicotine replacement therapy and medications combined with counselling.

**Dr. Anne Rowan-Legg**, Special Advisor for Community Paediatrics and Resident Engagement with the CPS, wrote a statement on the health needs of *children and youth in military families*. Released ahead of Remembrance Day, it focuses on the
unique stressors of military life and their effects on families. Frequent moves, lengthy separations from parents and extended family support, and high-risk deployments increase risk for mental health issues, maltreatment and problems with continuity of care. Dr. Rowan-Legg is a paediatrician at the Children’s Hospital of Eastern Ontario, with a practice focus on complex medical needs. She is also an assistant professor of paediatrics at Ottawa University. Her interest in military families stems from consulting at a paediatric clinic in Renfrew, Ontario, several times a month, where she sees many children from the military communities of Pembroke and Petawawa.

The final issue of Paediatrics & Child Health to be published before transitioning to CPS ownership took “Child and youth health in Canada: Walking in their shoes” as its theme. What a fitting milestone! Guest editor Dr. Denis Daneman, a respected clinician, leader and mentor at the Hospital for Sick Children and University of Toronto, worked with two former CPS presidents, Drs. Richard Stanwick and Robin Williams, to highlight the needs of disadvantaged populations and sound specific calls to action. The issue traced discrepancies between mainstream and marginal children and youth, who remain under-resourced, under the radar and disproportionately vulnerable to inequities in the health care system and society at large.

Three years of dedicated work by Drs. Douglas McMillan and Jean-Yves Frappier took to the world stage last August, when the CPS co-hosted the 28th International Pediatric Congress in Vancouver. As Congress President and Scientific Committee Chair (respectively) Drs. McMillan and Frappier planned and led an exceptional educational program. Nearly 3,000 participants from 162 member countries and organizations shared their expertise, commitment and vision. The 6-day congress reaffirmed the power of paediatricians to solve common—and not-so-common—health problems together, sometimes in difficult circumstances.

Dr. Sarah Lawrence, Chief of Endocrinology at the Children’s Hospital of Eastern Ontario, and Dr. Beth Cummings, a paediatric endocrinologist at IWK Health Centre in Halifax, led development of a national initiative to keep children with type 1 diabetes safe at school. A partnership of the CPS, Diabetes Canada and the Canadian Pediatric Endocrine Group, Diabetes at School is a groundbreaking website with bilingual training resources for educators, school boards, and parents of children with diabetes. It supports an expanding population of school-aged children with T1D, a condition requiring intensive round-the-clock management. Topics include understanding blood sugars, food and insulin, physical activity and T1D, and communication between home and school.
Kudos to Dr. Michael Dickinson, CPS President-Elect and Chair of the Action Committee for Children and Teens, for spearheading the 5th edition of our status report, Are We Doing Enough?, released in June. The report has an adaptable online format and tracks new provincial/territorial indicators of health and well-being, notably breastfeeding promotion, child death review processes and type 1 diabetes management in schools. Dr. Dickinson reviewed content with CPS committee chairs, consulted with outside experts when needed, helped set ratings and criteria, and edited the introduction and summaries.

Canada has resettled over 40,000 refugees from Syria since 2015, and fully half of these new Canadians are children or youth. An exceptional team of researchers, led by Dr. Chuck Hui, are conducting a one-time CPSP survey focused on the medical and mental health of this particularly vulnerable population. Dr. Hui is uniquely qualified to take on the task, as an eminent infectious disease expert and co-editor-in-chief of the CPS resource Caring for Kids New to Canada. We know that migrant children are at risk for many diseases and psychosocial issues. Data from this study will help Canadian health care providers to assess and manage a wide range of needs more specifically.

Casting a sidelight on the global Zika crisis, the Canadian Paediatric Surveillance Program (CPSP) has a study underway to determine the incidence of severe microcephaly in Canada. With investigators from the Public Health Agency of Canada and other subspecialty experts, Dr. Charlotte Moore Hepburn, CPS Medical Affairs Director, is exploring Canada-specific epidemiology. Cases where the virus is present during pregnancy have been detected here, and a recent practice point from Dr. Joan Robinson, which includes a detailed diagnostic algorithm, will be sent to all CPSP participants who report a case of severe microcephaly. The CPSP study ends in May 2018, with the number of cases in Canada expected to reach 250, based on international incidence estimates.

Can medically serious self-harm be a predictor of adolescent suicide? Dr. Daphne Korczak, principal investigator for a new CPSP study, hopes that monitoring this complex behaviour will reveal more about who is at risk for suicide and how best to intervene. Dr. Korczak, a psychiatrist, Director of the CLIMB Depression Program at the Hospital for Sick Children, and an active member of the CPS Mental Health and Developmental Disabilities Committee, knows that mental health problems present differently in children and youth than in adults. Tracking cases over a 2-year period, along with patterns of presentation, clinical features and the medical needs of youth who have been hospitalized for self-harm, may spur earlier interventions and—potentially, at least—inform a national youth suicide prevention strategy in the future.

Implementing the Neonatal Resuscitation Program (NRP) in Canada happens ‘by the book’! Heartiest congratulations to the CPS Neonatal Resuscitation Program (NRP) Steering Committee—and especially to Dr. Emer Finan and other executive members—for their many months of hard
work reviewing and adapting international and American guidelines for the Canadian context. The new NRP text launched in English in September, with the French following close behind. Best evidence-based changes to resuscitation practice—along with the educational components still to come—will continue to save countless newborns in their first minutes of life.

A new CPS Digital Media Task Force, with Dr. Michelle Ponti at the helm, will help physicians help parents to navigate the challenges of children’s screen time in an ever-expanding digital universe. Drawing together diverse experts from the CPS and allied organizations, and supported with a grant from Telus, the group surveyed members as a first step early in 2016. The need for an evidence-based statement on the benefits and risks of screen time in children under 5 years old was immediately clear. By the end of the year, a targeted literature search had been completed and a draft statement was well underway. Along with a practical knowledge translation component for health care providers and families, the new statement will be rolled out at this year’s annual conference.

Some tests and treatments commonly ordered by physicians don’t necessarily improve patient care. Choosing Wisely Canada helps start conversations between clinicians and patients about investigations, procedures or treatments that may be overused or inappropriate. Five things paediatric clinicians and patients should question was developed last November by the CPS, thanks to Dr. Isabelle Chevalier, who led the CPS Choosing Wisely Task Force. She consulted with experts on CPS committees and sections over many months, carefully reviewing current evidence on management and treatment options. Dr. Chevalier, who represents Quebec on the CPS Board of Directors, is also chief of division for general paediatrics at CHU Sainte-Justine, an associate clinical professor of paediatrics at the University of Montreal, and a senior assistant editor for Paediatrics & Child Health.

A final ovation and round of applause for Dr. Mark Awuku, winner of the Danielle Grenier Member Recognition Award for 2016, who is on his final leg as Chair of the CPS Continuing Professional Development Committee. It’s been a long and winding career road from the University of Ghana’s Medical School to his last regional CME course in Quebec City, but Dr. Awuku is a particularly dedicated and skilled fellow traveller. He has overseen CPS CME for more than 7 years, and was instrumental in securing CPS accreditor status with the Royal College of Physicians and Surgeons of Canada in 2000. An associate professor of paediatrics with the Schulich School of Medicine and Dentistry at Western University, Dr. Awuku received an honorary Doctor of Laws degree from the University of Windsor in 2016.