



MACAU: In this handout photo taken yesterday and released by the Macau Government Information Bureau, giant panda Xin Xin cares for one of two newborn twin baby pandas at the Giant Panda Pavilion on Coloane, Macau. —AFP photos

GIANT PANDA IN MACAU GIVES BIRTH TO TWINS

MACAU: A giant panda in Macau has given birth to twins, the first pandas to be born in the Chinese region. Xin Xin delivered the two male cubs on Sunday afternoon at the Giant Panda Pavilion in Coloane, said officials. She and the larger cub were in good health, but the smaller cub was underweight and was taken into intensive care. Xin Xin and her mate Kai Kai were a gift from the mainland and arrived in Macau

last year. They mated naturally, a government spokeswoman told BBC News, but Xin Xin was also artificially inseminated with sperm from Kai Kai. The larger cub, weighing 138g (0.3 lb), was born at 15:45 local time (08:45 GMT). The smaller cub, weighing just 53.8g, was born at 16:27 local time. The panda pavilion has been closed since 14 June to prepare for the delivery. —www.bbc.com



MACAU: One of two newborn twin baby pandas is cared for at the Giant Panda Pavilion on Coloane, Macau.



MACAU: Giant panda Xin Xin holds one of two newborn twin baby pandas in her mouth as the other lies on the ground (bottom right) at the Giant Panda Pavilion.

EVERYTHING YOU NEED TO KNOW ABOUT NEUROLOGICAL DISORDERS

By Dr Marc Difazio

KUWAIT: Marc DiFazio, MD, is the Medical Director of the Montgomery County Outpatient Center, and Director of Ambulatory Neurology at Children's National Health System. He served as Chief of Child Neurology at Walter Reed Army Medical Center until 2005 before transitioning to private practice in Rockville, Md. He is well-known to the community for his service, leadership, and expertise in clinical child neurology, with particular emphasis in the areas of Tourette syndrome, headache/migraine, concussion, and the use of botulinum toxin (Botox) for a variety of conditions including headache, spasticity, and sialorrhea.

Question: To begin with, can you tell a little bit more about yourself? What is it that you currently do at Children's National?

Answer: I am a child neurologist and see many children with a variety of diagnoses. I also have a number of administrative roles to help with the functioning of patient care in the ambulatory setting at Children's National.

Q: What are the most common neurological conditions prevalent in children?

A: Headaches, epilepsy, Tourette syndrome, neurodevelopmental difficulties and developmental delay, attention deficit, and then other more unusual or rare conditions that affect the central nervous system such as metabolic conditions or brain tumours.

Q: How much does genetics play a role in the development of neurological disorders?

A: Genetics is probably the number one driving force behind most neurologic conditions, including psychiatric conditions such as anxiety/obsessive-compulsive behaviours, migraine, epilepsy, and neuro developmental challenges such as Tourette syndrome.

Q: What are the main symptoms associated with neurological disorders? And what are the long-term effects associated with them?

A: Neurologic conditions reflect dysfunction of the central and peripheral nervous system, and so, anything that the brain, spinal cord, or nerves or muscle do, can produce abnormalities. Anything from thought/cognitive impairments to gait disturbances can reflect a central nervous system abnormality.

Q: How are neurological conditions diagnosed?

A: The best initial screening for neurologic condition is a history and a good physical examination by a primary care provider. Subsequent testing reflects the suspected area that might be affected so, we might test nerve function to determine if there is a peripheral nerve or muscle condition, and we might do an MRI of the brain if we are concerned regarding a structural problem in the brain.

Q: Are there any other complications in specifically treating children with these diseases?

A: Serious conditions such as brain tumours or metabolic conditions often are associated with complications related to treatment or to the condition itself.

Q: What are some of the main treatment methods available for neurological conditions? Are neurological conditions curable?

A: Many neurological conditions are treatable such as migraine. Treatments include medications, as well as nonmedical strategies like regular exercise, and dietary interventions.

Q: How does the incidence of neurological ailments in Kuwait compare to other parts of the world? Are there any risks unique to the GCC region?

A: Many of the neurologic conditions seen in developed countries are present in Kuwait. Additionally, there are conditions that are genetically driven related to consanguinity, that are perhaps more frequently seen in the Middle East. However these conditions are seen throughout the world.

Q: At the conference, you spoke about new onset epilepsy. Can you give us a brief overview?

A: Epilepsy is common, affecting approximately 1% of the population. Most epilepsy is treatable in childhood, and children often respond to a single medication in relatively moderate doses. Some children are identified early as more difficult to treat, and oftentimes require a specialist as a result.

Q: Can you tell us a little bit about Tourette syndrome and what it is?

A: Tourette syndrome is a condition that affects 2-4% of the world's population. It is associated with tics, involuntary movements of the body, and is associated also with neuropsychiatric manifestations including obsessive-compulsive

in an adult and in a child?

A: Strokes occur in all age groups, and in fact are fairly common in the newborn period. Children tend to be more medically resilient and possibly have more brain plasticity, to cope with the injury versus an adult.

Q: How do you treat strokes? And what are some new methods and techniques available ways to treat them?

A: Strokes are treated by supportive care after they occur. However, most importantly prevention is critical to treat strokes, as many of the conditions that predispose to stroke are preventable or able to be minimized such as obesity, and the



Marc Difazio, MD, Neurology



behaviours, anxiety, and learning challenges.

Q: Should ADHD always be treated with medication? Do you agree that the condition is over diagnosed and over medicated?

A: Attention deficit disorder and is treated with both medications and nonmedical strategies, for instance the removal of distraction or regular exercise. It is not necessarily over-diagnosed or overmedicated.

Q: How important is early detection in paediatric neurological conditions?

A: Early identification of any neurologic condition is important to help with setting expectations for the family and to develop an effective treatment plan.

Q: What causes strokes?

A: Strokes are caused by blood flow disturbances to the central nervous system. This can occur because of blood clots or sudden bleeding in the brain.

Q: Many people assume strokes only happen in adults. What is the difference between a stroke

resultant medical consequences.

Q: How would you assess the awareness of neurological disorders? Is there a stigma attached to certain conditions? How can we improve our understanding and treatment of these diseases?

A: Stigma is common in neurologic conditions as they are often associated with cognitive impairments or psychiatric manifestations. It is important to recognize that psychiatric conditions are brain conditions, and so, stigma should be removed and individuals should be treated as with any medical condition.

Q: What would be the most important advice you would give patients suffering from neurological conditions? What about their families?

A: It depends on the condition. Be optimistic, enlist a good primary care physician/clinician, and also a Child Neurologist. We are up to date on best practices, new technologies, side effects and non-medical strategies to help your child. In Kuwait, you are lucky to have so many expert paediatric subspecialists and experts in metabolic care.

CLINIC PAGE



Kuwait Times
248 33 199





Dr. Fahad Al-Mukhaizeem
د. فهد علي المخيزيم

استشاري أطفال
M.B. Bch. FRCPC. FAAP. PEM



Al-Jabriya - Block 1A - St. 1 - Mazaya Building - 15th Floor - Clinic B - Tel.: 22269369 - Fax: 22269368