HONG KONG COLLEGE OF PAEDIATRICIANS

WORKING GROUP ON CURRICULUM REVIEW

SYLLABUS PROPOSAL

AREA: Paediatric Endocrinology

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Non-specialist reviewer: Dr Frankie Cheng

**BASIC TRAINING**

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| **TOPICS** | **SUBTOPICS** |
| Common growth disorders | Accurate measurement of height, weight, body proportions and head circumference.  Utilization of growth charts and be familiar with the use of local growth standards.  Utilization of condition-specific growth charts in children with conditions like Down’s syndrome and Turner’s syndrome  Definition of normal and abnormal growth for local children  General approach and initial management of:   * Short stature/tall stature * Failure to thrive * Obesity   Epidemiology of obesity |
| Common pubertal disorders | Assessment of pubertal development  Definition of normal and abnormal puberty for local children  General approach and initial management of:   * Precocious/delayed puberty * Thelarche/adrenarche   Disorders of the ovary/testes and female/male sexual maturation   * Recognition and initial workup on common disorders, including Turner syndrome, Klinefelter syndrome, constitutional delay in growth and puberty |
| Diabetes mellitus | Recognition, diagnosis and initial management of type 1 and type 2 diabetes  Acute management of diabetic ketoacidosis |
| Hypoglycaemia | Acute management and critical samples in hypoglycaemia in neonates and children |
| Disorders of sex development | Approach and initial management of a neonate with ambiguous genitalia |
| Thyroid problems | Recognition and initial management on common thyroid problems   * Congenital hypothyroidism * Primary hypothyroidism * Thyrotoxicosis * Goitre and thyroiditis   Approach to thyroid nodules |
| Adrenal disorders | Recognition and acute management of adrenal crisis  Recognition on the need of stress dose steroid for children with adrenal insufficiency at times of acute illness or perioperatively |
| Disorders of calcium, phosphate and vitamin D metabolism and metabolic  bone diseases | Recognition and initial management on hypo/hypercalcaemia, hypo/ hyperphosphatemia, rickets and vitamin D deficiency |
| Fluid and electrolytes disorders | Recognition and initial management on:   * Diabetes insipidus * Syndrome of inappropriate antidiuretic hormone secretion (SIADH) |
| ~~Neuroendocrine system of hypothalamus and pituitary~~ | ~~Recognition and initial workup on panhypopituitarism~~ |
| ~~Endocrine manifestations and late effect of systemic disease~~ | ~~Risk factors and manifestations of the late effects of systemic diseases, including cancer survivors~~ |
| Lipid disorders | Cardiovascular risks of dyslipidaemia  Clinical manifestation of dyslipidaemia  Screening of high-risk children |

Essential skills:

1. Domain 2 – Communication
2. Domain 4 – Patient management

Desirable skills (but optional for General Paediatric Training):

1. Interpretation of common endocrine investigations, namely baseline hormonal tests and and oral glucose tolerance test,

**HIGHER TRAINING**

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| **TOPICS** | **SUBTOPICS** |
| Common growth disorders | Further investigations and appropriate referrals of:   * Short stature/tall stature * Failure to thrive * Obesity   Simple obesity vs. obesity due to other pathological causes  Management strategies of obesity  Screening for obesity related comorbidities  Obesity prevention |
| Common pubertal disorders | Further investigations and appropriate referrals of:   * Precocious/delayed puberty * Thelarche/adrenarche   Disorders of the ovary/testes and female/male sexual maturation   * Long term management on common causes, including Turner syndrome, Klinefelter syndrome, constitutional delay in growth and puberty   Initial workup of primary amenorrhea, secondary amenorrhea, and oligomenorrhea |
| Diabetes mellitus | Long term management of type 1 and type 2 diabetes  Basic understanding on monogenic diabetes |
| Hypoglycaemia | Participate in the management of:   * Hyperinsulinaemic hypoglycaemia   Diagnostic workup in children with hypoglycaemia |
| Disorders of sex development (DSD) | Further investigations and management of common DSD including congenital adrenal hyperplasia and undervirilised male |
| Thyroid problems | Long term management on common thyroid problems   * Congenital hypothyroidism * Primary hypothyroidism * Thyrotoxicosis * Goitre/thyroiditis   Recognition and timely consultation/referral of thyroid storm  Further investigation of thyroid nodules |
| Adrenal disorders | Participate in the diagnosis and management of:   * Adrenal insufficiency * Less common adrenal disorders e.g., Adrenal hyperfunction, Cushing syndrome etc. |
| Disorders of calcium, phosphate and vitamin D metabolism and metabolic  bone diseases | Participate in further workup and management on disorders of calcium, phosphate and vitamin D metabolism and metabolic bone diseases, including hyperparathyroidism, nutritional rickets and inherited hypophosphatemic rickets  Initial workup of recurrent fractures |
| Fluid and electrolytes disorders | Participate in the long-term management on:   * Diabetes insipidus * Syndrome of inappropriate antidiuretic hormone secretion (SIADH) |
| Neuroendocrine system of hypothalamus and pituitary | Recognition and initial workup on panhypopituitarism  Participate in the long-term management on  panhypopituitarism, craniopharyngioma and related pituitary disorders |
| Endocrine manifestations and late effect of systemic disease | Risk factors and manifestations of the late effects of systemic diseases, including cancer survivors |
| Lipid disorders | Management of dyslipidaemia |

Essential skills:

1. Domain 2 – Communication
2. Domain 4 – Patient management

Desirable skills (but optional for General Paediatric Training):

Interpretation of common endocrine function tests including water deprivation test, growth hormone stimulation test, LHRH test and low dose short synacthen stimulation tests

Cross reference with:

1. Intensive Care
2. Metabolic Medicine