URGENCY AND EMERGENCY IN PEDIATRICS

The medical profession must be chosen with both heart and soul; it is a difficult and often risky choice. In order to practice medicine we are often exposed to stressful situations in which patients’ lives are in our hands. This happens not only in urgency and emergency care but also in our day-by-day practice, given that making a correct diagnosis by means of thorough anamnesis and appropriate physical examination is an art that can determine patients’ futures. Quality of life depends largely on healthcare actions promoted and on specific interventions whenever needed. We must value primary health care and promote proper control of chronic diseases to avoid creating unnecessary demand for emergency services. Emergency services should be accessed only in cases of urgent care or in emergencies, but in reality many patients fail to go to Basic Health Units or outpatient clinics. Sometimes this is because appointments are difficult to schedule and other times because it is not always possible to make sure patients are followed by the same healthcare professional. When we chose the medical profession it was because we wanted to do what was best for patients and to act ethically and humanely. We must listen the patients’ complaints to understand the real reasons for illnesses. Often the disease is in the “soul”, not in the body. Good professionals must study and be interested and motivated just as much as they need adequate health service infrastructures. Investing in medical training means investing in patient health.

Nowadays, the pace of the diffusion of knowledge is accelerated. Information and communication technologies allow for the globalization of knowledge and for ideas and views to be more easily exchanged and shared in the health sciences. The internet allows news to be disseminated rapidly in all parts of the world. Geographical barriers can be overcome and it is possible to avoid having to send patients to major centers, to provide them with better care support and to manage statistical and epidemiological data. Telehealth actions are already used nationally for primary, secondary, and tertiary healthcare. Professionals can be trained without leaving their workplaces. Concerns can be addressed and second opinions obtained through teleconsulting. Incorporating new technologies is one of the goals of all who work in the telehealth area so as to create possibilities for telemonitoring, diagnosis and care. The patients are the direct beneficiaries of these actions. Video conferencing, web conferencing and distance education are used for continuing education and can be used in courses, lectures and case discussions.

Electronic and printed media can be used for scientific dissemination. The Revista Médica de Minas Gerais (Medical Journal of Minas Gerais) is the official vehicle for disseminating scientific information among professional unions, medical schools and cooperatives in the state of Minas Gerais. We are always striving to publish articles of interest to our readership and to provide updates and reflections on medical practice. The RMMG’s mission requires everybody’s participation so that the journal can fulfill its role nationally and internationally. Many changes are being planned. The editorial board has set targets and is committed to increasing the number of original articles as well as the journal’s periodicity and visibility.

This issue addresses many topics that should interest our medical colleagues. Review articles present many new concepts to guide the professional practice, especially in pediatric urgency and emergency settings. Pediatric heart rhythm anomalies, acute respiratory failure, and rapid sequence intubation are approached from a practical standpoint, promoting an understanding of basic concepts while providing conduct updates and standardization. The integral health actions, patient well-being, prevention, diagnostic support, and therapy updates are presented in an interesting and engaging format with no compromise to the high quality of the scientific dissemination.

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