Gearing up for Battles Ahead

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As I take charge as the President of the Indian Academy of Pediatrics (IAP), I am truly humbled and grateful for the trust and confidence you have placed in me. It is my profound honour to lead the Academy and I assure you of my unwavering commitment. My approach will always be collaborative, and we will walk side by side, not ahead or behind, as we work to elevate our Academy to new heights.

Looking back at Pedicon 2025 in Hyderabad, I cannot help but feel a deep sense of pride. It was nothing short of a masterpiece, a conference that surpassed all expectations and left an indelible mark on us all. From the majestic chariot welcome to the spectacular inauguration, every detail reflected the passion and dedication of our colleagues. The scientific sessions, including the wide variety of workshops, continuing medical education (CME) sessions, and training of trainer (TOT) programs, were executed flawlessly, showcasing not only the meticulous planning but also the true spirit of volunteerism. That, it was all managed by Telangana's senior IAP members without professional event managers, is a testament to their commitment to the Academy's ideals. I would like to convey special thanks to the organizing team led by Dr. M Surendranath and Dr. Neeli Ram Chander for their exceptional and relentless efforts and setting a new benchmark for Pedicons in times to come.

Now that we are back to our workplaces after the phenomenal success of Pedicon 2025, it is time to address the Human Metapneumovirus (HMPV), an emerging threat. However, unlike SARS-CoV-2, HMPV is not a novel virus and has been around for over two decades since its identification in 2001. Most people are expected to have some immunity against this respiratory virus which makes the risk for a pandemic less likely. However, HMPV infection is especially dangerous for children under five who may manifest with severe illnesses like bronchiolitis and pneumonia, often requiring hospitalization. Given the vulnerability of children, the high rate of HMPV transmission through droplet route and close contact, a possibility of emergence of mutant strains, lack of effective vaccine and incomplete immunity conferring potential for reinfection, a cautious approach is warranted. A unified, multifaceted strategy is needed to prepare ourselves for an outbreak, should the need arise. As pediatricians, we have a duty to act and not just react. The key strategies would include:

Enhanced surveillance: Strengthening monitoring systems to detect outbreaks early and respond swiftly

Infection control by establishing and following strict infection control protocols including strict hand hygiene and isolation of infected persons

Research and innovation to deepen our understanding of HMPV, develop effective vaccines, and improve treatment options

Infrastructure and preparedness: Revisiting pediatric infrastructure to ensure it meets the demands of our growing population such as adequate bed strength, oxygen supplies, trained personnel, and medications

Advocacy and collaboration with government to develop policies that prioritize funding for research, public awareness campaigns, and equitable vaccine distribution

Public awareness: Educating communities on prevention, early symptom recognition, and timely medical intervention

The IAP has already initiated steps by forming a dedicated HMPV Task Force. This team will provide expert guidance and collaborate with the government to strengthen preparedness. As pediatricians, we stand as guardians of the youngest and the most vulnerable members of society. But addressing a challenge like HMPV requires teamwork. Together - with healthcare professionals, policymakers, and the community - we can create a safer future. Let us channel the spirit of collaboration and excellence to tackle not only this challenge but the many more that may lie ahead.