

Dedicated to Children

by **Marika Azzopardi**

Working with neonates, adolescents and any other age in between, Consultant Paediatric Neurologist Dr Doriette Soler comes across as a very down-to-earth woman. With a penchant for playing tennis, collecting and listening to world music especially of the South American genre, as well as enjoying micro-light flying with her better half in what has to be rigorously fine weather, she speaks about her busy workload in a professional specialization that has seen her active since 1996.

"Working with children, whether locally or overseas is always a privilege." These are her opening comments to describe a specialization that sees her treating 300 new cases presenting neurological problems per year.

"The commonest reasons for referral are seizures, movement disorders and developmental problems. Quite frankly, I have always been fascinated in knowing how the brain functions, in what makes us human and what accounts for our individuality."

Student days spent working at Id-Dar Tal-Providenza on a voluntary basis, helped her make the ultimate career decision. Taking up both local and overseas training, she moved from her initial preference in behavioural and developmental sciences to take up a specific focus in paediatric neurology, with particular emphasis on epilepsy.

Today, she is active within the International League Against Epilepsy (ILAE), holding the post of Vice President of the Malta chapter. She explains more about this, "The ILAE is an international association of physicians and other health professionals working in the field of epilepsy. The main aims are to advance and disseminate knowledge about epilepsy, to promote research, education and training and improve services and care for patients, especially by prevention, diagnosis and treatment. The chapter works closely with the Caritas Malta Epilepsy Association which was set up by voluntary workers in 1996 and now lists almost 300 members. The Association is for persons with Epilepsy and their families. I have been actively involved in the *Out of the Shadows Global Campaign Against Epilepsy* which was established in 1997 as a joint project by the WHO, ILAE and IBE (International Bureau for Epilepsy)."

Dr Soler has also been involved in a number of clinical research projects both locally and with international collaborators. Some of these projects have contributed towards improving the quality of life of children and families with epilepsy, honing in on the genetics of epilepsy, drug use in children with epilepsy and epidemiology of epilepsy. She attended a number of international epilepsy and neurological meetings and has been invited as speaker and as a trainer in paediatric neurology training courses both locally and overseas. "I am a member of the British Paediatric Association, the European Paediatric Neurology Society, the Association for Research in Infant and Child Development, EUREPA (European Epilepsy Academy) and a reviewer of a number of overseas and local medical journals."

Asked about the way that working with children affects her, she comments, "From my experience in working with families both in Malta and those from other countries, I feel that what I call the 'human condition' is much the same everywhere. The advantage of working with local families is that one can

understand the local customs, beliefs and culture. This is important in the field of Neurodisability where it is vital that the needs of the child within the family context are addressed."

Ultimately however, parental anxiety, hopes and concerns about their child's future are a universal reality and Dr Soler believes these to be always a major issue when one counsels parents, no matter what the family's background is.

But how easy is it to remain emotionally detached?" As a paediatrician and as a parent one cannot completely emotionally dissociate oneself from the anxiety and worries parents face when their child is diagnosed as having a serious illness or disability. Giving bad news to parents is not an easy task and needs to be done well. The professional approach essentially needs to be one which is empathic, supportive and which allows for an open discussion with parents and carers while giving a realistic picture. This requires skill and experience and loads of humanity."



Neurological conditions facing a paediatric neurologist are various, some of which are rare. She explains further, "Around one third of the workload of a general paediatrician (i.e. excluding sub specialty services) is spent managing acute or chronic neurological disease in childhood. Among the most common disorders affecting children are epilepsy, cerebral palsy, brain tumors and muscular dystrophies."

Whilst neurological problems vary in severity, some can be life-threatening while others are treatable. Most are complex problems and require a multidisciplinary approach to management. Dr Soler explains that one of the clinician's main concerns when managing children with neurodisabilities is that often parents search for a remedy and embark on the use of expensive peripheral therapies which have no scientific backing for their effectiveness.

Today, she feels that much has been done in the field of Neurology and Neurodisability in terms of health, educational and social services. "The National Commission Persons with Disability has worked hard and should be applauded for the relentless efforts it has made to raise awareness on issues related to persons with disability and their families." She says that presently there is the need to address and develop expertise in specific neurological disorders and encourage more work in multidisciplinary teams. Dr Soler refers to the pressing need of giving research its due importance and in this regard incentives and funding need to be forthcoming.

"In terms of services, there is a need to consolidate the transitional care of adolescence with chronic neurological conditions when these are transferred from paediatric to adult services. There is

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also a need for more small residential facilities for the care of adolescence with developmental and neurodisabilities, once they reach school-leaving age. The future of a son or daughter with a neurodisability is always the major concern of aging parents.”

What about drug use? I ask Dr Soler whether she is involved in prevention or treatment of young drug abusers, or whether she can give an insight into the phenomenon vis a vis younger users?

“I am not directly involved in this field but as a clinician I have encountered a number of cases. However, I can speak as a parent. Obviously, all parents are concerned with this ever increasing phenomenon especially the ease and accessibility to alcohol. Drug abuse is a complex problem resulting from a complex interaction of a number of biological and environmental factors. As parents, I feel that the best



protection we can give our children is by educating them on drug abuse, enhancing their resilience in times of stress and sharing time with them. Having realistic expectations in terms of educational achievement and developing the child’s talents whatever these may be, can help children keep out of harm’s way.” ☐