

Training Curriculum of General Paediatrician with Special Interest in Gastroenterology in District General Hospital setting

Introduction

Consultant Paediatrician based at district general hospital, serving a population of approximately 500,000, will take a lead role in organising local service for children with gastro enterological and nutritional problems. The work load in sub-speciality may vary from 20% – 80%. Number of consultants throughout the country has been increasing and will increase in the future as centralisation of the paediatric service becomes more common.

Training requirement of such posts should match with the service requirement for the future. We also have to define what constitutes a district general hospital with gastroenterology service and its relation with tertiary centres. Specialist Registrar Training curriculum for those with special interest in Gastroenterology should be in tune with service requirement.

Duration of Training

In the last Extra-ordinary BSPGHAN AGM meeting in Bristol consensus of opinion was in favour of two years sub-speciality training. As a whole Specialist Registrar Training programme consists of two years of core training with three years of higher training. Out of this three years of higher training two years could be spent in training in gastroenterology, nutrition and hepatology. The last year of the training programme ie fifth year, the trainee could spend in a large DGH where there is an established bias of special interest in gastroenterology, nutrition and hepatology. Members particularly thought that there is hardly any justification of three years of tertiary gastroenterology training for those paediatrician who will take gastroenterology, nutrition and hepatology as their special interest in their future careers. Most important is the flexibility and it should suit particular trainee with his/her training programme.

Training Programme

The purpose of the training is that at the end of the training period the trainee should be suitable for appointment as a Consultant Paediatrician with special interest in gastroenterology, hepatology and nutrition in a district general hospital setting. The trainee should have some flavour and experience of hepatology but not necessarily in a supraregional training centre. During the period of the training the trainee should have had a broad range of clinical experience in gastroenterology, hepatology and nutritional matters. There should be some specific training in diagnostic techniques. A regular contact with tertiary centres for gastroenterology, hepatology and nutrition is desirable.

Curriculum

A. Core objectives:

1. Clinical experience in the principle disease encountered in this speciality in childhood
2. Diagnostic techniques, which includes upper-GI-endoscopy and lower- GI-endoscopy
3. Nutritional assessment
4. Experience in clinical audit
5. Achieve skill in teaching undergraduate and postgraduates (with ability to use various teaching aids)

B. Gastroenterology and Hepatology Training Objectives:

General:

Knowledge of gastroenterology and hepatology: the aetiology, pathology and clinical features, treatment and outcome measures for the gastro-intestinal and hepatic diseases.

Hepatology:

1. Presentation of liver disease in neonatal period
2. Chronic liver disease
3. Acute presentation of various liver diseases in childhood and adolescence
4. Indication for liver transplantation and management of post transplant patients in peripheral hospital
5. Understanding of the mechanism of malnutrition in liver disease.
6. Basic knowledge of gut immunology

Gastrointestinal & Nutrition:

1. Understanding the basis of normal infant childhood feeding and reasons for nutritional support
2. Assessment of feeding and nutrition in infancy and childhood
3. Understanding of specific concerns and management of nutritional problems in a child with severe neurological disorders (ie feeding tube/gastrostomy etc)
4. Failure to thrive – assessment, multidisciplinary management
5. Management of common gastrointestinal problems
6. Shared case management of complex gastrointestinal problems (in conjunction with teaching hospitals)

7. Management plan for handing over to adult services

Practical Skills:

1. Upper and lower GI Endoscopy
2. PH Study
3. Pancreatic function Test
4. Hydrogen Ion Breath Test
5. Enteral and Parenteral nutrition

C. Management Skills

1. Management Skill - strategic planning and writing a business plan
2. Experience of the day-to-day running of a paediatric unit within the paediatric directorate
3. Importance and involvement of clinical audit
4. Knowledge of NHS RND support

D. Teaching Skills Organisation of Undergraduate and Postgraduate Teaching Programmes

1. Organisational skill, routine departmental tasks including duty rotas, teaching programmes and postgraduate meetings.
2. Attitude, understanding and implementation of leadership role in multi-disciplinary team.
3. Communication - appropriate approach to parents, children, colleagues, GP and community health care staff.
4. Education and teaching; self-education and teaching others.

E. Assessment of Training

Regular interview and assessment should be done in a log book.

Broad Syllabus for this Training

Clinical Experience in:

Paediatric Gastroenterology

1. Pyloric stenosis
2. Intussusception
3. Hirschsprung's disease
4. Peptic ulcer and Helicobacter pylori infection
5. Vomiting and reflux
6. Constipation
7. Recurrent or protracted diarrhoea
8. Acute and recurrent abdominal pain
9. Gastrointestinal bleeding
10. Intestinal obstruction
11. Differential diagnosis of abdominal masses
12. Short gut syndrome
13. Chronic inflammatory bowel disease
14. Small intestinal failure and intractable diarrhoea syndrome
15. Gastrointestinal problems in handicapped children
16. Chronic undernutrition/failure to thrive
17. Feeding disorders including self-starvation (Anorexia)
18. Infections of gastrointestinal tract and liver
19. Gastrointestinal food allergy
20. Acute diarrhoea including use of oral rehydration therapy
21. Cystic Fibrosis
22. Pancreatic Disease

Paediatric Hepatology

1. Jaundice

2. Liver failure (acute and chronic)
3. Infectious liver disease
4. Metabolic liver disease
5. Neonatal liver disease
6. Biliary atresia
7. Chronic liver disease

Nutrition

1. Enteral nutrition
2. Parenteral nutrition (Hospital and Home)
3. Experience of nutritional support team
4. Self starvation (Anorexia)
5. Chronic undernutrition/failure to thrive
6. Cystic Fibrosis