



Could a Neurologist not be Interested in the Neurological Problems of Children and Adolescents?

Nörolog, Çocuklar ve Ergenlerin Nörolojik Sorunlarına Uzak Durabilir mi?

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They could (!) but not in the emergency service. According to experts who deal with malpractice, to not treat a patient aged under 18 years old admitted to emergency service is cause for a judicial inquiry. We have many co-workers who have been indicted for this reason.

Unfortunately, it is hard for patients and their parents to reach a child neurologist in our country. According to recent data, there are 250 child neurologists who have a pediatric origin and 15 who have a neurology origin (who were certified by the Ministry of Health). According to 2013 data of the Turkish Statistical Institute, the population of people aged under 18 years is 22.761.702 (www.tuik.gov.tr). When we add the increase in this population in the last 3 years and Syrian refugees aged under 18 years, we have 25 million children to 270 child neurologists as a rough estimate. In other words, a child neurologist should take care of 92 500 children-adolescents. On the other hand, there is a mass of 2.500 neurologists in the field. The Ministry of Health has not been accepting applications of neurologists for child neurology sub-branch since 2002 and allows only pediatricians to be specialized in this sub-branch by legal regulations. It is very important for us to qualify for the child neurology sub-branch. In today's conditions a neurologist who wants to be specialized in child neurology has to bring a lawsuit against the Ministry of Health by referring to the Constitutional Court and even to the European Court of Human Rights. There is no other option.

I want to highlight that if we want, we can still treat child-adolescent patients and we have to fight not to lose our rights. "In the field of neurology..." is written on our (including the newly

graduated neurologists) certificates, not "In the field of adult neurology..." The reasons for not treating patients aged under 18 years in institutions in which we work are managerial reasons and/or the dominance of pediatric clinics. Again if we struggle, these limitations can be eliminated.

Most of the neurologists in our country received an education about child neurology during their specialization, except for a short time when it was canceled. This spell seems short (3-4 months) but it is enough to gain capability to deal with some neurological problems of children and adolescents and to manipulate others.

When it is very hard to reach a child neurologist, who will diagnose and manipulate a boy with Duchenne muscular dystrophy who has difficulties in walking and standing after bending down, and whose creatine kinase levels are found at 10.000 U/L? Who will make a fast differential diagnosis and begin treatment of an adolescent patient with quadriplegia who has long segment transverse myelitis on cervical magnetic resonance imaging? Who will evaluate wake and sleep EEGs and arrange treatment of children who have rolandic seizures in sleep or frequent absence seizures every day? Pediatricians? Pediatricians who graduated from training and research hospitals (excluding those who graduated from faculties of medicine) mostly do not have a neurologic perspective because there is no educational term for child neurology and/or there are no child neurologists in many of these hospitals. As a consequence, they hastily send these children with neurological problems to child neurologists. A rocky road then begins for parents to reach a child neurologist and sometimes they may even not be successful. Consequently, very

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few child neurologists who work in state hospitals try to answer complaint files written by patients' parents in their busy working environment.

With all the data, can neurologists, of whom I am very proud to be a member, stay away from neurological problems of

children and adolescents with all their knowledge, capability, and conscience?

Ethics

Peer-review: Internal peer-reviewed.