

The transition from pediatric to adult services

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Dear Editor,

It was a very welcome surprise to see another two renal units (Hospital Curry Cabral and Hospital Dona Estefânia, both in Lisbon) initiating pediatric-to-adult nephrology programs. In a letter to the editor, “*The transition from pediatric to adult services*”¹ Vieira et al. presented her initial and promising experience, and we congratulate her on the initiative. We pioneered such an approach back in 1998 with a joint pediatric/adult out-patient clinic where, in the presence of the pediatrician in charge of the case, the *Adult-Nephrologist*, the patient and a close relative/care giver, all the clinical and social aspects involved were discussed. Particularly the differences between the adult world and the protective environment the youngster used to be in, and how to overcome “aggressive” situations. We published our initial experience in 2007² (69 patients) and revisited our data in 2015³ (151 patients). Unfortunately, neither of these papers nor the Editorial⁴ by Professor J. Stewart Cameron — published together with the 2007 paper — were mentioned by Dr. Vieira in the text or as references.

In order to guarantee compliance with medication and appropriate lifestyle in this age group, a close surveillance is crucial, while still respecting individual autonomy where confidence between the nephrologist and patient plays a crucial role in the process. The sooner we follow a patient, the sooner we gain his/her confidence.

No experience in this subject should be left out since, as with so many other aspects of life, there is a continuum of knowledge in

medicine that started many years ago and will continue for many years to come.

Our main obligation, as doctors, is to spread knowledge, not to keep it.

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References

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