JOURNAL
OF THE CANADIAN ACADEMY OF CHILD AND ADOLESCENT PSYCHIATRY / DE L'ACADÉMIE CANADIENNE DE PSYCHIATRIE DE L'ENFANT ET DE L'ADOLESCENT

EDITORIAL

What are the Bounds of Child and Adolescent Psychiatry?

John D. McLennan

This issue of the Journal of the Canadian Academy of Child & Adolescent Psychiatry covers a lot of territory. This includes important contributions to child psychopharmacology. First, an examination of a cohort of children with treatment-resistant obsessive compulsive-disorder who received a combination of fluvoxamine and clomipramine (Fung, Elbe, & Stewart. 2021). This piece exemplifies important attempts to systematically document the treatment of complex patients in real world subspecialty contexts to help move our field forward. A systematic literature review on serotonin syndrome in children and adolescents follows (Xue & Ickowicz, 2021). This article identifies the dearth of work on this topic despite the ubiquitous use of serotonergic medications in this population (Lukmanji et al., 2020). For this important condition, it appears that our understanding is still limited to case studies including a recent additional one published in the Journal of the American Academy of Child & Adolescent Psychiatry (Hutchison, Clark, & Shaffer, 2021). These papers are followed by a mixed methods study exploring youth perspectives on seeking psychotherapy (Mehra et al., 2021). We hope to see more submissions of critical analyses of important components of psychotherapy delivery and their effectiveness and impacts. Our empirical research section is then rounded out by an important attempt to document the nature of mental health impacts of Covid-19 on a cohort of children and adolescents in a Canadian sample (Mactavish et al., 2021).

Complementing this set of clinically-focused research articles are two commentaries that tackle broader landscapes. The first encourages us to reflect on where we are at in Canada, almost three years into legalization, with youth and cannabis, and to consider broader patterns and concepts and not only rely on our clinical experience (Haines-Saah & Fischer, 2021). This is followed by a commentary considering the equitability of research funding in Canada for different mental disorders with concerns that eating disorders might be short-changed despite their prevalence and associated morbidity and mortality (Stone, Dimitropoulos, & MacMaster, 2021). Eating disorders is also the focus of our Recommended Academic Reading section, so check this out to see what articles our eating disorder experts have identified as recent important publications in this field.

Finally, I encourage you to check out the CACAP section at the end of this issue. In addition to the regular "Updates from the CACAP Executive" column, there are two essays that present opposing views as to whether our Academy should officially reorganize to extend its mandate to include transitional aged youth (perhaps up to age 25). As a co-author of one of the essays, I will say no more. However, these essays, and the broad array of content and themes captured by the other articles in this issue, triggered me to wonder about what are the bounds of our subspecialty. In recently reviewing the expected competencies for our subspecialty as described by our college (Royal College of Physicians and Surgeons of Canada, 2020), I see there are expectations for abilities in a broad array of therapies (including the expanding neurostimulation modalities), as well as expectations for understanding of prevention and early intervention in our expansive field. We are also expected to have working abilities to interface with social welfare, juvenile justice, and schools systems, and knowledge of cultural and genetic dimensions. And now there is a consideration of expanding the age range of our population.

I wonder if aspects of the scope of the general practitioner (GP) serve as an appropriate analogy of our professional breadth in the sense of needing to know a little bit of everything, resulting in the infeasibility of having in-depth knowledge of specific components within our field. For the GP, the breath of medical care, whereas for the child psychiatrist, the breadth of influences on child development. However, the analogy has limits, as unlike our GP colleagues, we do not necessarily have clear referral pathways to higher levels of subspecialists for issues that are supposed to be within the scope of our subspecialty. One possible response to our very broad mandate might be to further subspecialize, a luxury I have embraced in my own urban practice. For those who do not have this luxury, there may be other responses, perhaps focusing limited resources only on consultation within the emergency room or short-term inpatient care, given the pressing needs in those settings, with no time or resources left for participation in outpatient care, let alone any meaningful contributions to early intervention or prevention services. I look forward to some Letters to the Editor about this conundrum in our field, or in response to ideas raised in the essays at the end of this issue, or to any of the other fine papers in this issue.

References

Fung, R., Elbe, D., & Stewart, E. (2021). Retrospective review of fluvoxamine-clomipramine combination therapy in obsessive-compulsive disorder in Children and Adolescents. *Journal of the Canadian Academy of Child and Adolescent Psychiatry, 30*(3), 150-156.

Haines-Saah, R., Fischer, B. (2021). Youth cannabis use and Legalization in Canada – Reconsidering the fears, myths and facts three years in. *Journal of the Canadian Academy of Child and Adolescent Psychiatry*, *30*(3), 192-197.

Hutchison, L., Clark, M., & Shaffer, S. (2021). Insidious onset of serotonin syndrome in a 6-year-old boy. *Journal of the American Academy of Child and Adolescent Psychiatry*, *60*(2), 201-202.

Lukmanji, A., Pringsheim, T., Bulloch, A. G., Stewart, D. G., Chan, P., Tehrani, A., & Patten, S. B. (2020). Antidepressant prescriptions, including tricyclics, continue to increase in Canadian children. *Journal of Child and Adolescent Psychopharmacology*, *30*(6), 381-388.

Mactavish, A., Mastronardi, C., Menna, R., Babb, K., Battaglia, M., Amstadter, A., Rappaport, L. (2021). Children's mental health in southwestern Ontario during the COVID-19 pandemic. *Journal of the Canadian Academy of Child and Adolescent Psychiatry, 30*(3), 178-191.

Mehra, K., Hawke, L., Watson, P., Sheikhan, N., Leroux, E., Henderson, J. (2021). Youth psychotherapy seeking behavior: A concurrent mixed methods study. *Journal of the Canadian Academy of Child and Adolescent Psychiatry*, *30*(3):166-177.

Royal College of Physicians and Surgeons of Canada (2020). *Child and Adolescent Psychiatry Competencies 2021 Version 1.0*. Accessed on June 5, 2021. Available at https://www.royalcollege.ca/rcsite/documents/ibd/child-adol-psych-competencies-e.pdf

Stone, K., Dimitropoulos, G., & MacMaster, F. (2021) Food for thought: A dissonance between healthcare utilization costs and research funding for eating disorders in Canada. *Journal of the Canadian Academy of Child and Adolescent Psychiatry, 30*(3), 198-204.

Xue, S., & Ickowicz, A. (2021). Serotonin syndrome in children and adolescents exposed to selective serotonin reuptake inhibitors - A review of the literature, *Journal of the Canadian Academy of Child and Adolescent Psychiatry*, *30*(3), 157-165.