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## THE IMPORTANCE OF TRANSITIONAL CARE FOR THE CHRONICALLY SICK CHILD

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**T**he progress made in pediatric care in the 20th century not only saved many children from early death, but allowed normal development of adolescence and adulthood. This success has created a new problem – how to transition children through adolescence and into adult life. Although ‘adolescent medicine’ has been a part of pediatric practice in many hospitals, probably beginning in Boston, it was aimed more at caring those who developed serious illnesses in the difficult early adolescent years rather than transitioning those with long term problems. It is not feasible to keep children in a pediatric environment indefinitely; the pediatric hospital would soon become an adult one. Programmes are being developed in many specialties to carry on care into early adult life. The question then is how to look after the patients in adulthood. Where there is an adult equivalent, such as diabetes or asthma, an adult service can gradually take over. Where there is no adult equivalent such as in congenital heart disease, spina bifida or exstrophy, specialist lifelong care is needed. Early studies suggest that this achieves better outcomes medically and socially than care in the generality of health care.

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