A Recommitment Ceremony

s I and many clinicians, researchers, and educators in our field prepare for the 64th Annual Meeting of the American Academy of Child and Adolescent Psychiatry (AACAP) in Washington, DC, I find my excitement building. Since I first attended the AACAP Annual Meeting as a trainee, I have viewed it as an opportunity to immerse myself in the past, present, and future of our field—in its clinical wisdom, its rapidly expanding science, and its passionate community. As a card-carrying introvert, I appreciate the intimacy of both our field and our community, though I also recognize the sobering fact that there aren't enough of us to meet the demand for our clinical expertise and that we must resist any tendencies towards insularity and continue to advocate on behalf of those we serve. Each year, I leave the Annual Meeting re-energized and recommitted to learning, educating, advocating, and delivering the best possible clinical care to our patients and their families.

This issue of JAACAP Connect represents for me a similar experience of recommitment, as it reflects beautifully the purpose and mission with which this publication was established. In recognition of the rapidly changing field of child and adolescent psychiatry and in support of the skill development necessary to critically appraise the scientific literature and translate highquality science into clinical practice, I am thrilled to introduce the inaugural column of what will be a regular recurring series by David Rettew, MD. His column, titled "Lab to Smartphone," will tackle hot-topic issues within the field, including those controversies that stem from the all-too-common pseudo-science that potentially confuses us and our patients/families, alike. Read his column (p. 4), and consider joining him in the "lab-to-smartphone" movement!

Underscoring the JAACAP Connect mission to engage clinicians in learning throughout the lifespan via experiences that emphasize translation of research into clinical practice, the authors who have contributed articles to this issue represent multiple stages of professional development (trainees in MD, MD/PhD, and clinical fellowship programs, early career psychiatrists, and established clinicians, researchers, and educators) and address a variety of topics of clinical pertinence. Slat and Glowinski (p. 6) address the clinical and biological factors that contribute to an observed sexual dimorphism in youth with autism spectrum disorder (ASD). Harrison and van Schalkwyk (p. 9) review the problem of adolescents with ASD being bullied, the current limitations to better understanding this problem, and several ways that this bullying can be addressed. Building on a previous JAACAP Connect article, Sinyor (p. 13) highlights the potential utility of J.K. Rowling's Harry Potter series as a message of hope and resilience in the face of trauma and suicidal impulses. Closing this issue, Giles (p. 17) reviews coprophagia, a high-risk complex behavioral disorder that can have various etiologies and, as a result, be difficult to treat.

As I approach the second half of my term as Editor, I am particularly grateful for both the spirit with which *JAACAP Connect* continues and the authors, Editorial Board members, and *JAACAP* staff who make it possible. I very much look forward to joining many of you in Washington, DC, and to (re)affirming our commitments to one another, our profession, and the vital work that still needs to be done.

Oliver M. Stroeh, MD Editor



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