pain on right side. Blood exams showed rise of CRP (19 mg/L) and normal WBC. An ultrasound performed in the A&E department was normal. Because of the persistence of pain, we repeated an ultrasound the day after that showed an anechogenic uniloculated 18 mm cyst at the level of the right ovary. The report was of functional follicular cyst.

After two days of observation and worsening of the symptoms, laparoscopy was performed: a necrosis of the fimbriae due to torsion at the right fallopian tube infundibulum was found. The ischaemic fimbriae were removed according to Kroener fimbriectomy. Hystological analysis described fimbriae characterized by oedema and vascular congestion.

**Discussion** Torsion of infundibulum could mimic a functional annessial cyst, with a normal echogenic appearance, while a torsion of the whole Fallopian tube can be more easily detected and suspected, avoiding delayed treatment. In our case, to base the management on clinical symptoms was mandatory.

**Conclusions** Isolated torsion of infundibulum of Fallopian tube is a challenging diagnosis. It should be considered in case of acute lower abdominal pain in young girls. Early laparoscopy seems to be the best approach for diagnosis and treatment.

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# OSTEOLYTIC LESIONS OF THE CALCANEUS IN PAEDIATRIC PATIENTS: RESULTS FROM A MULTICENTER STUDY

doi:10.1136/archdischild-2012-302724.0464

¹A Frings, ²D Andreou, ³F Machacek, ⁴B LieglAtzwanger, ⁵M Zacherl, ⁶R Windhager, ⁵A Leithner. ¹Medical University of Graz, Graz, Austria; ²HELIOS Klinikum Berlin-Buch, Berlin, Germany; ³Orthopaedic Hospital Gersthof, Vienna; ⁴Institut of Pathology, Medical University of Graz; ⁵Department of Orthopaedics, Medical University of Vienna, Vienna, Austria

Tumours of the calcaneus are exceedingly rare. X-rays are the standard examination tool and therefore we wanted to evaluate if X-rays alone were sufficient for proper diagnosis. Diard's classification was applied to define whether different types of lesions were characteristically distributed in the bone and in addition we analyzed whether type and/or duration of symptoms were possible indicators of malignancy.

Sixteen patients (12 male, 4 female; mean age 15 years, range 8 to 20) were identified. The definitive diagnosis was simple bone cyst (n=10), aneurysmatic bone cyst (n=3), intraosseous lipoma (n=1) and Ewing's Sarcoma (n=2). Parameters analyzed were type and duration of symptoms, tentative diagnosis, operative procedure, recurrence rate, revision and localization of the lesion according to Diard.

The main current complain was of pain without prior history of trauma in twelve cases. Symptoms preceded the definitive diagnosis for a mean time of seven (range 1 to 26) months. Discrepancies of the radiological and definitive diagnosis occurred in four of 16 cases. Applying Diard's system trabecular area number 6 was affected in 14 of 16 cases. We did not observe local recurrence for benign lesions.

In each case of an osteolytic lesion of the calcaneus a malignant tumor must be ruled out and thus, plain X-rays in two planes alone are not sufficient and should therefore be followed by MRI. Applying the Diard system different types of lesions are not characteristically distributed in the bone. Increasing pain without previous trauma should always justify further examinations.

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PREMENSTRUAL SYNDROME IN ADOLESCENTS OF ANAND - CROSS-SECTIONAL STUDY FROM INDIA USING PREMENSTRUAL SYMPTOMS SCREENING TOOL FOR ADOLESCENTS (PSST-A)

doi:10.1136/archdischild-2012-302724.0465

<sup>1</sup>SV Kamat, <sup>1</sup>AS Nimbalkar, <sup>2,3</sup>SM Nimbalkar, <sup>1</sup>Department of Physiology; <sup>2</sup>Department of Pediatrics, Pramukhswami Medical College; <sup>3</sup>Central Research Services, Charutar Arogya Mandal, Anand, India

**Background and Aims** Premenstrual syndrome (PMS) disrupts lives of girls who otherwise would lead more productive lives. We assessed prevalence and severity of PMS in adolescents of Anand, a small town in western India and identified probable associations with age, locality, food habits, obesity, stress, genetic influence, menorrhagia and dysmenorrhoea.

**Methods** Cross sectional observational study in which Premenstrual Symptoms Screening Tool for Adolescents (PSST-A) questionnaire was self-administered to screen PMS and Premenstrual Dysphoric Disorder (PMDD). 1355 girls of Gujarati ethnicity in age group 10 to 23 years with regular menstrual cycles participated. Obesity was assessed through Body Mass Index. Results were examined for associations that could indicate effect of lifestyle on PMS/PMDD.

**Results** The prevalence of moderate to severe PMS was 17.3% and PMDD was 4.7%. 95.0% girls had at least one PMS symptom, 68.8% had at least one moderate to severe PMS symptom, 49.9% had one or more physical symptoms and 89.8% had more than one PMS symptom. 37.1% had disruption of daily activities while 24.2% remained absent from school/college due to PMS. 75.4% girls felt that PMS was a normal part of menstruation and 50.0% reported moderate to severe stress. 21.4% had physical symptoms every menstrual cycle. Age, weight, BMI, stress level, dysmenorrhoea and menorrhagia contribute significantly to PMS, whereas menorrhagia, stress level and junk food contribute significantly to PMDD.

**Conclusion** Prevalence of moderate to severe PMS and PMDD in this population is higher than reported elsewhere. PMS interferes with day to day life significantly.

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#### **SOCIAL INEQUALITIES IN ADOLESCENT HEALTH**

doi:10.1136/archdischild-2012-302724.0466

¹²PF Freitas, ³MP Domingues. ¹Núcleo de Orientação em Epidemiologia, Universidade do Sul de Santa Catarina UNISUL, Tubarão; ²Serviço de Saúde Pública, Universidade Federal de Santa Catarina; ³Maternidade Carmela Dutra, Florianópolis, Brazil

**Objectives** To investigate how socioeconomic indicators and individual variables from woman, pregnancy and delivery, can interact to influence rates of adolescent pregnancy in South Brazil.

**Methods** Information from the Live Birth National Information System (SINASC), concerning 419,272 deliveries taking place in the State of Santa Catarina, South Brazil, from 2003 to 2007 were analised. The study combined ecological and cross-sectional methods of data collection and analysis. Correlations between socioeconomic indicators and rates of adolescent pregnancy were obtained. Annual rates and crude and adjusted rates, using Cox Regression, were calculated for literacy, ethnicity, duration of pregnancy and frequency to antenatal care consultations.

**Results** Rates of adolescent pregnancy for the 293 states of Santa Catarina in the study period was 18.26% decreasing linearly from 2003 to 2007, as a result of a decreasing in rates among women from the higher socioeconomic strata. Rates showed to be inversely associated to socioeconomic and demographic indicators. Negative correlations were found for the Human Development Index, Educational Development Index, literacy, and income Rate. The categories with higher proportions of adolescent mothers were low level of literacy, lower frequency to antenatal care, lower gestational age and non-white ethnicity. For extremes in the period the Prevalence Ratios increased for low literacy, lower frequency to antenatal care, and for non-white women.

**Conclusions** Adolescent pregnancy in Brazil is an important Public Health problem with socioeconomic determinants, whose effects will impact mainly those women living in the less privileged groups.

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## AID OF PHYSICIANS TO CHILDREN AND ADOLESCENTS WHO EXPERIENCED SEXUAL ABUSE

doi:10.1136/archdischild-2012-302724.0467

R Wolf. Interdisciplinary Department of Social Sciences, Bar-llan University, Ramat Gan, Israel

This article discusses children and adolescents who have been the victims of sexual abuse. It focuses on the special role that physicians play in identifying such children and providing them with initial support and assistance. The article discusses the short and long-term effects of childhood sexual abuse, including the physical and emotional impact of sexual exploitation and severe neglect. It presents the effect of this phenomenon on the victims, and how they express and deal with their trauma. It is important for physicians and other medical professionals to be sensitive to the possibility of children being abused, scared, or threatened. It is important to note that if the abusers are members of the child's family, it requires double attention and it's necessary to involve other welfare authorities. In such a case the physician plays a double role - a health provider and supportive figure. The article also includes a discussion of effects that are manifested when the victim has grown to adulthood, such as personality disorders. The method used to treat these abused children is to bring forth loved ones to mitigate the effect of the injury and help the victim deal with the painful feelings it engenders. The purpose of this paper is thus to draw the attention of teachers and school counselors to the importance of identifying these abused children so as to be able to rehabilitate them and allow them to develop properly, as the sexual abuse of children damages not only their present but also their future development.

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## A REVIEW OF CHILD PROTECTION PRACTICES IN A BUSY DISTRICT GENERAL HOSPITAL

doi:10.1136/archdischild-2012-302724.0468

<sup>1</sup>C Walsh, <sup>2</sup>A Livingstone, <sup>3</sup>T Mulroe. <sup>1</sup>Paediatrics, Altnagelvin Hospital, Derry; <sup>2</sup>Paediatrics, Antrim Area Hospital, Antrim; <sup>3</sup>Paediatrics, Enniskillen Hospital, Enniskillen, UK

**Background and Aims** Following the tragic death of Victoria Climbié in 2003, Lord Laming produced a report setting out a number of recommendations aimed at improving Child Protection (CP) practices throughout the UK. We decided to review our practice in a District General Hospital in Northern Ireland to determine whether recommendations from previous CP audits were implemented, and in addition check our compliance with the Laming recommendations.

**Methods** We performed a retrospective chart audit on CP cases presenting to our paediatric department between September 2008 and March 2010. Using recommendations from previous audits and Lord Laming we defined our standards and devised a pro forma for collecting data.

**Results** Our targets were achieved in a number of areas, in particular medical note keeping, use of CP illustrative templates, documentation of telephone exchanges and face to face discussions, the presence of Nursing Progress Notes, identification of the child's consultant and GP in the medical notes and documentation of results of investigations. We failed to meet our objectives relating to certain aspects of communication, especially taking a history from the child, proper use of interpreters, documenting consent, informing social services in writing and documenting review arrangements.

**Conclusions** Progress has been made in how we manage these difficult and sensitive child protection cases. However, we have identified a number of areas where we can improve upon our current practice, and have made recommendations that we hope will further aid in safeguarding our children in the future.

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# EXPLAINING THE UNEXPLAINED: HOW FAR TO INVESTIGATE SYMPTOMS IN LEARNING DISABLED PATIENTS?

doi:10.1136/archdischild-2012-302724.0469

CL Lea, N Sauven, MPB Thorpe. Department of Paediatrics and Child Health, Royal Cornwall Hospital, Truro, UK

**Background and Aims** We present a case of a severely autistic 14 year old boy referred to paediatric outpatients with a 1 year history of pica and early morning retching. This was initially considered behavioural in origin. Review of previous Abdominal X-ray (Image 1) revealed a gastric bezoar; at surgery this had resolved but duodenal adhesions were found and divided with recovery of symptoms. Distinguishing which symptoms are behavioural in origin and which are organic can prove a diagnostic conundrum in learning disabled patients. We aim to provide guidance for rational investigation.



Abstract 469 Figure 1 Gastric Bezoar

**Methods** We present a literature review on learning disabled children presenting with unexplained symptoms.

**Results** Autistic children have an increased tendency to develop pica, and gastric bezoar causing obstruction is well described. Learning disabled children can also present with a range of gastrointestinal problems including diarrhoea, constipation and vomiting which may also be secondary to pica. Behavioural symptoms may be difficult to distinguish from gastrointestinal symptoms for example gastro-oesophageal reflux.

**Conclusions** We propose a collaborative approach between general and community paediatricians and present proposed guidance for investigation of symptoms.

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# BEING INFORMED - A NATIONAL SURVEY ON CONSENT IN UK PICUS

doi:10.1136/archdischild-2012-302724.0470

B Lakin, D Sideras, S Mahoney. PICU, Royal Liverpool Children's NHS Trust, Liverpool, UK