

1471 **PROTOCOL BFM-95 IN TREATMENT OF CHILDHOOD ACUTE LYMPHOBLASTIC LEUKEMIA (ALL) AND LYMPHOBLASTIC LYMPHOMA (LL)**

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Introduction ALL and LL as the most common malignant diseases in childhood are two related malignancies that are treated by the same protocols.

Aim The aim of the study is to see the outcome of the application of protocol BFM-95 in the treatment of ALL and LL in childhood in Macedonia in the period 2000–2007.

Method We analyzed the medical records of 88 pediatric patients treated at Department of Hematology and Oncology at the University Pediatric Clinic in Skopje, 69 of which with ALL and 19 with LL.

Results The annual average registered patients with ALL was 8.6 and 2.4 patients with LL. At the end of the study 85.5% patients with ALL and 42.1% patients with LL were alive. Regarding the outcome of the examined patients there were statistically significant differences between the two groups ($p=0,0075$). There is a strong correlation between the type of disease and the outcome of the disease in patients ($p=0,00001$). Relaps was registered in 7.3% patients with ALL and in 31.6% patients with LL, where the analysis showed that between the two studied groups there is statistically significant difference ($p=0,0079$). There is a correlation between the type of disease and the occurrence of relapse ($p=0,0149$). According to Kaplan-Meier-survival curve, a 5-year overall survival is 92.3% in the group with ALL and 43% in group with LL.

Conclusion Although these two related cancers are treated with the same protocols, with current therapeutic approaches the outcome is better for patients with ALL compared to patients with LL.

1472 **ULTRASOUND IMAGING OF ABDOMINAL MALIGNANCIES IN NEONATES AND FETUSES**

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Purpose To study cases of the diagnosis of main abdominal malignancies in infants in the neonatal period and to review the effectiveness of ultrasound for these pathology from the fetus.

Patients and Methods A retrospective analysis of clinical and anamnestic data of the first month of life of children with retroperitoneal neuroblastoma, hepatoblastoma, renal tumors, who were treated in a two Belarusian cancer centers for the period from 1995 to 2011 were made. In the study group were included 16 neonates: 9 - with neuroblastoma, 3 - with hepatoblastoma, 4 - with mesoblastic nephroma.

Results It is established that the primary method of prenatal and postnatal diagnosis of the main forms of malignant abdominal tumors in all cases were the ultrasound diagnostic study. No there were neonates with nephroblastoma in this study. The highest diagnostic efficacy of ultrasound in the perinatal period has been observed in cases of mesoblastic nephroma. Half of them were diagnosed prenatally. Value for prenatal and postnatal diagnosis for neuroblastoma was 1:8. Prenatal detection of hepatoblastoma in the observed cohort of infants was ineffective. Postnatal volume this tumor was 150–282 ml. This are were definitely a congenital tumor.

Conclusions Ultrasonography is a method of choice for initial imaging of the tumors in the neonatal period. Obviously, there are diagnostic reserves for increased efficiency of prenatal detection of malignant and potentially malignant abdominal tumors. The results

can be useful when planning screening programs for children in the first year of life.

1473 **PANCREATIC NEUROENDOCRINE TUMORS IN CHILDREN**

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Objectives Neuroendocrine tumors of the pancreas are rare specifically in pediatric age group. We report a 3.5-year-old girl with four weeks of icterus and primary misdiagnosis of hepatitis A and final diagnosis of well differentiated low grade neuroendocrine carcinoma of the pancreas. With our best knowledge this is the first report of this tumor in under –5-year-group.

We highlight the patient's presentation, examination, and management as well as review the characteristics of pancreatic neuroendocrine tumors.

Methods A retrospective case study of a 3.5-years-old girl with history of 4 weeks Jaundice, weight loss, hepatomegaly and positive total anti HAV antibody without fever, abdominal pain, vomiting, or palpable mass in abdominal examination.

Results IgM anti HAV, HBs Ag, and HCV Ab were all negative except for IgG anti HAV. Abdominal CT scan with oral and IV contrast revealed an intermediate enhancing mass in pancreatic head suggesting hypervascular pancreatic mass lesion. Examination and immunohistochemical staining of the tumor revealed well differentiated neuroendocrine carcinoma with extension to duodenal wall and lymph node metastasis.

Conclusion Despite of low incidence, the pediatricians should be aware and consider tumors in differential diagnosis of jaundice in children specifically if prolonged. In addition total anti HAV Ab test for diagnosis of hepatitis A should be discouraged.

1474 **ACUTE BRONCHIOLITIS? OR A THORACIC MASS IN AN INFANT**

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A 7-month old girl with the complaints of crying, cyanosis and breathing rapidly was brought to a hospital by her family. After taking nebulised salbutamol, the symptoms relieved. However, the symptoms reoccurred despite appropriate acute bronchiolitis treatment. She was hospitalized due to massive right thoracic infiltration in the chest x-ray. During evaluation, thoracic ultrasound showed a suspicious solid mass at the posterior mediastinum. Thorax computerised tomography revealed a right hemithoracic and posterior mediastinal gross solid mass. As the staging procedure, bone marrow aspirations were done which resulted in normal findings. The trucut biopsy of the thoracic mass resulted as small round blue malignant tumor cells consistent with peripheral neuroectodermal tumor/ewing sarcoma which was very rare in this age group.

1475 **VALUE OF BLOOD BIOMARKERS TO IDENTIFY YOUNG FEBRILE INFANTS DIAGNOSED WITH UTI AT HIGHER RISK FOR BACTEREMIA. INITIAL RESULTS**

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