Background and aim Timely and accurate diagnosis of children with osteomyelitis is crucial, diagnostic imaging play a major role in determine the presence of acute osteomyelitis, treatment planning and follow up. Physicians encouraged to take the advantage of all available modalities as early intervention would prevent all possible adverse outcome of late diagnosis. The aim of this study is to explore the different imaging modalities in verifying the diagnosis of paediatrics acute osteomyelitis.

Methods All cases diagnosed with Acute Osteomyelitis between January 2000 and December 2013 were retrospectively reviewed at main tertiary children hospital. Our approach included a detailed description of radiological features of paediatric patients with acute haematogenous osteomyelitis.

Results 79 cases of acute osteomyelitis were diagnosed. 68 (86.1%) of children had X-Ray within first two weeks. (51.5%) reported as normal compared to (48.5%) abnormal (Periosteal reaction- Osteolytic lesions- soft tissue swelling). Ultrasound done in 34 (44%) of children, (70.6%) reported normal vs. (29.4%) abnormal (effusion). MRI study done in 73 (92.4%) and revealed osteomyelitis in 100% of imaging.16 patients (20.3%) had Bone Scan, (12.5%) reported normal compared to (87.5%) abnormal. (100%) of children with positive bone scan had similar osteomyelitis on MRI.

Conclusion Our study confirmed that MRI is the gold standard of imaging modality which combines high sensitivity with specificity to confirm osteomyelitis in children despite having normal X-ray, Ultrasound and Bone scan. Simple X-ray might be useful to diagnose osteomyelitis if MRI is difficult to perform or if the cost plays a major role in the patient care.
Background Rapid diagnosis and early treatment of bacterial meningitis in children is so important. Goal of study: Comparison the amount of procalcitonin, in CSF of children with bacterial and non bacterila meningitis. 

Methods A cross sectional study conducted in Rasoul Akram and Bahrami hospital in Tehran during 2 years (2011–2013) upon 57 children with suspected meningitis selected Conveni- ence. CSF samples obtained, and routine laboratory examinations (cell count, protein, sugar, smear, culture) had done. 0/5–3 cc of CSF was collected and stored at- until assayed. Amount of Procalcitonin (ELISA Ray biotech kit) detected in CSF. A receiver-operating – characteristic curve (ROC) was constructed to illustrate various cut-offs of Procalcitonin levels in differenti- ating between 2 groups of meningitis.

Results 57 children with meninitis were between 1 months-13 years; mean age 26.3: ± 2.98 months, were enrolled in this study. Mean age of 30 cases with bacterial meningitis was 2.5 years, and in 27 cases with aseptic meninitis was 1.6 years. For differentiation of bacterial meninitis; A PCT level in CSF >=0.235 ng/mL had a sensitivity of 96.4% and a specificity of 80%.

We evaluated whether procalcitonin (PCT) might aid diagnosing serious bacterial infections in a general paediatric ICU population. 201 patients accounted for 332 PCT samples.

Conclusion The presence of PCT in CSF can potentially assist clinicians in faster diagnosis and appropriate treatment in bacte- rial meninitis. These data suggest PCT can assist in identifying patients without bacterial meninitis and limit antimicrobial use.

Objective Our study evaluates the epidemiological and demo- graphics of the children who were admitted to Suleyman Demi- rel University, Medical Faculty, Paediatrics Department with the pre-diagnosis of pandemic influenza.

Methods and Materials Demographic characteristics, clinical findings, laboratory tests results and radiological researchs of 64 patients (n = 64), who were admitted to Suleyman Demirel University, Medical Faculty Paediatric Department with the pre-diagnosis of pandemic influenza were analysed and evaluated.

Results Average age of the patients, that were admitted and observed with pre-diagnosis of pandemical influenza, was 32.4 months (1–188 months) and 34% (n = 22) of the cases were female. H1N1v diagnosis was confirmed in 14% (n = 9) of the patients with pre-diagnosis of pandemiz influenza. Most common complaints during submission were severe cough (85.9%), fever (68.8%) and weakness (57.8%). Among the the patients who were H1N1v positive, 55% (n = 5) of them, had preexist- ing diseases. Five patients needed intensive care during the observation and treatment. Two (22.2%) of them did not survive.

Conclusion Clinical findings of pandemical influenza and sea- sonal influenza are quite similar in children. Pre-existing diseases increase the rates of morbidity and mortality.

Objective 6-Mercaptopurine (6-MP) is an oral purin analogue which inhibits the purine synthesis via being converted to ribo- nucleotide. 6-MP is being widely used in cancer chemotherapy and immunosuppressive therapy. The major side effects which limit its clinical practice are hepatotoxicity and bone marrow suppression. In this study, the protective effect of Capparis ovata (CAP) which is an antioxidant plant, against the hepatotoxicity induced by 6-MP is investigated.

Methods Thirty-eight paediatric rats were seperated into four groups. We administered saline solution to the control group (C) (n:8), 6-Mercaptopurine to the second group (6-MP) (n:10), Capparis ovata to the third group (CAP) (n:10) and 6-Mercapto- purine plus Capparis ovata to the last group (6-MP+CAP) (n:10) for 14 days, respectively. On the fifteenth day, we meas- ured complete blood count and ALT, AST for hepatotoxicity.
PO-0243 Procalcitonin Use In Diagnosis Of Paediatric Meningitis

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