

considered in this case after the disease being treated which is consistent with the hypothesis.

PO-0854 THE BIG PICTURE: CASE REPORT OF AN INTRACRANIAL DISSECTING ANEURYSM

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Background Aneurysms affecting the posterior inferior cerebellar artery-vertebral artery complex (PICA-VA) represent 0,5–3% of all intracranial aneurysms and, in children, they are rarely recognised.

Most children present with eye symptoms, ataxia, headache, vomiting, limb paresis/paralysis and/or impaired consciousness. Neck pain, one of the hallmark symptoms in adults, is often absent.

Case report The authors present a 22 months infant, admitted at the Emergency Room after an episode of labial cyanosis and cutaneous pallor followed by prostration and altered gait pattern; without seizure or loss of consciousness. He presented hemodynamically stable, with right peripheral facial palsy, ipsilateral truncal imbalance and head rotation and refusal to walk. No evidence of oculoparesis, motor deficits or meningeal signs.

Brain CT-scan showed vascular dilation in the posterior cranial fossa, compressing medulla oblongata and pons structures. Angio-MR confirmed the presence of dissecting aneurysms of the right PICA and 4th segment of the right VA, with intramural thrombus and compression of the brainstem, without ischemia or bleeding.

A stent was placed in the PICA and an intravascular embolization coil in the VA. The child was discharged with no evidence of new neurological deficits.

An history of repeated minor head trauma in the context of tantrums was posteriorly clarified.

Conclusion In this case, as in literature, association between symptomatic PICA-VA aneurysms and minor head or cervical trauma seems possible. Often, there is no other underlying abnormality.

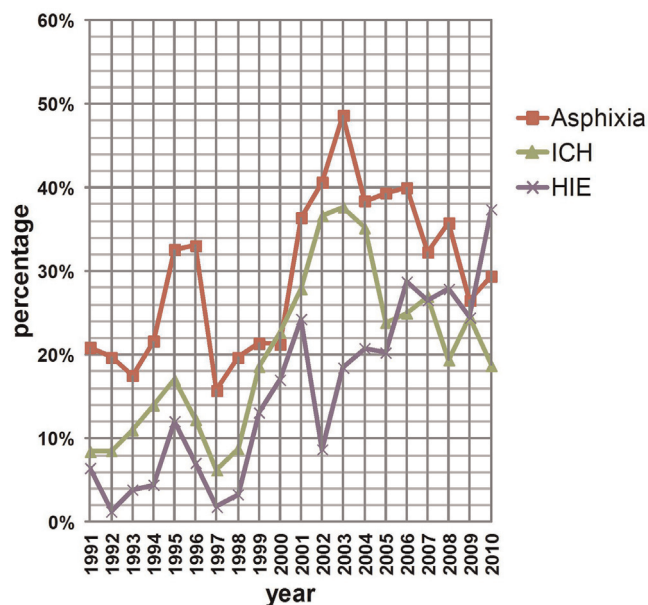
Despite the frightening presentation, prognosis is usually good. An endovascular approach seems to be safe and efficient in treating this condition.

PO-0855 DEVELOPMENTAL CONSULTANCY AT ZEMUN'S HEALTH CENTRE: RISK FACTORS IN NEONATES (1991–2010) WITH EMPHASIS ON ASPHYXIA, INTRACRANIAL HAEMORRHAGE AND HYPOXIC-ISCHAEMIC ENCEPHALOPATHY

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Background and aims To present at-risk factors in neonates („at-risk“ babies) to the total number of children born in Zemun (the large municipality in Belgrade) between 1991 and 2010; to sort risk factors with emphasis on asphyxia, intracranial haemorrhage (ICH) and hypoxic-ischaemic encephalopathy (HIE), as

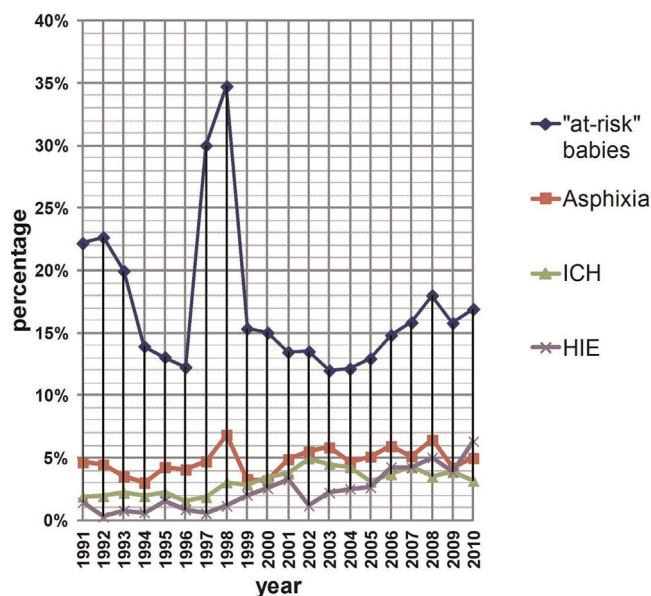


Abstract PO-0855 Figure 1 The number of “at-risk” babies and risk factors to the number of babies

the most serious factors that could be responsible for brain damage and a number of disorders.

Method The study population of neonates observed and registered in the Zemun's Health Centre“.

Results During the twenty-year period (1991–2010) 20.716 babies were born (minimum 772 in 1993, maximum 1241 in 2009), among them 3.506 (16,94%) were „at-risk“ babies. In the period 1997–1998 it was evident increase in „at-risk“ babies, when the maximum was 34,73% in 1998, compared to the minimum of 12,00% in 2003 (Figure 1). A new increasing trend of “at-risk” babies in the period 2003–2010 was noticed. Absolute and the relative change of the most serious risk factors are shown in Figure1 and Figure 2, respectively. Very often asphyxia was dominant over all risk factors (1995–1996, 2001–2006). ICH increased till 2002, both absolutely and relatively, after he



Abstract PO-0855 Figure 2 The number of risk factors to the number of “at-risk” babies