EOC included bloody stool (3/3, 100%), diarrhea (2/3, 66%), abdominal colic (1/3, 33%), elevated IgE levels (2/3, 66%), peripheral eosinophilia >500 cells/microL (1/3, 33%).

Conclusion EGIDs in children vary a lot among different age groups and clinical manifestations. Endoscopic exam with biopsy should be considered for unexplained gastrointestinal symptoms which may persist for weeks and lack of infectious etiology. Prompt diagnosis need highly suspicion of practitioners and could avoid unnecessary operation and/or delayed treatment.

696 DELAY OF GASTRIC EMPTYING BY ¹³C-ACETATE BREATH TEST RELATED TO ORTHOPAEDIC SCOLIOSIS IN NEUROLOGICALLY IMPAIRED PATIENTS WITH GASTROESOPHAGEAL REFLUX

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Background and Aims Delayed gastric emptying often occurs in patients with gastroesophageal reflux (GER) due to neurological impairment (NI). The aim of this study was to evaluate gastric emptying of liquids in patients with symptomatic GER using the ¹³C-acetate breath test (ABT), and to compare the gastric emptying rates with the severity of orthopaedic scoliosis between patients without and with NI.

Methods Sixteen patients were divided into 2 groups; group 1 without NI (6 patients) and group 2 with NI (10 patients). The liquid test meal consisted of RacoL™ (5 ml/kg) mixed with ¹³C-acetate (50 mg for infants, 100 mg for children, and 150 mg for adolescents). Breath samples were collected for ¹³CO₂ measurement before the intake of the meal, every 15 minutes during the first 2 hours after the meal and every 30 minutes thereafter to assess the ingestion of ¹³C-acetate and RacoL™. ¹³CO₂ was measured using a gas chromatograph-isotope ratio mass spectrometer. The results were expressed as % of ¹³C expired per hour and cumulative ¹³C excretion over a 3-hour period. The severity of orthopaedic scoliosis was quantified by Cobb angle.

Results Statistical relations were

1. age and half excretion time in ¹³C-ABT ($t_{1/2ex}$), $p=0.0649$;
2. age and groups with or without NI, $p=0.00018$; age and Cobb angle of scoliosis on plain Xp, $p=0.0087$; and severe Cobb angle ≥ 30 degree and $t_{1/2}$, $p=0.1962$.

Conclusion According to ¹³C-ABT, the delayed gastric emptying in patients with GER due to NI was related to severe orthopaedic scoliosis.

697 ENDOSCOPIC AND HISTOPATHOLOGICAL FINDINGS IN CHILDREN WITH UPPER GASTROINTESTINAL BLEEDING

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Introduction The etiology changes according to the age of child for upper gastrointestinal system(GI) bleeding. Esophagogastroduodenoscopy (EGD) is used to determine the source of upper GI bleeding in 90% of children when performed in the first 24 hours.

Aim In this study we aimed to determine the etiology of the upperGI bleeding in children. In order to determine the etiology we evaluated the EGD and biopsy findings.

Methods We evaluated the EGD and biopsy findings of children who complaint of upperGI bleeding.

Results Eighteen children were in newborn period. We detected that 12 of infants hematemesis was due to swallowed maternal blood by Apt-Downey test. EGD was performed to 6of newborns

and 4of them had no pathology but 2 had vascular malformations. Eight children were below 1year of age. We detected Mallory Weiss tear in two infants and moderate severe esophagitis findings was seen on biopsy materials. Six of these cases have both macroscopic and microscopic findings of gastritis on antrum and H.pylori(+). There were 22 cases above 1year old. Four of them had ulcer on bulbus. Six of them had esophageal varices. Mallory Weiss tear was detected on 3 of 12 cases and their biopsies were consistent with moderate-severe esophagitis. Macroscopically gastritis on the antral part was detected in 9 cases and biopsies were consistent with active gastritis and also all ofthem was H.pylori (+).

Conclusion In order to indicate the severity of bleeding it is very important to determine the bleeding site and etiology of bleeding. So that a detailed history and complete physical examination is very important. The importance of endoscopy in determinaiton of etiology is undisputed.

698 ELECTROLYTIC AND ACIDOBASIC DISORDERS AT CHILDREN WITH SEVERE DEHYDRATION (CAUSED BY DIARRHOEA)

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Introduction Electrolytic and acidobasic disorders that appear during the severe dehydration are frequent.

Purpose Presentation of electrolytic and acidobasic disorders among children with severe dehydration caused by acute diarrhoea.

Material The examined children were infants and preschool children hospitalized at the Intensive Care Unit during 2007.

Methods Based on clinical assessment and laboratory analysis.

Results During 2007 there were 657 children of different age groups hospitalized at the Intensive Care Unit. The highest number 462 (70.3%) of them were infants and the lowest number of them 195 (29.7%) were preschool age children. The highest number 196 (29.8%) were with the severe dehydration caused by acute diarrhoea, 187 (27.7%) of children dehydrated due to the decompensate bronchopneumonia, whereas the lower number of children of 12 (1.8%) were with acute intracranial disease and other diseases. According to the types of dehydration, there were 100 (51%) of patients with isonatremic dehydration, 54 (27.5%) were with hyponatremic dehydration and 42 (21.42%) were with hypernatremic dehydration. The values of potassium were normokalemia at 85 (43.3%), with hypokalemia 80 (40.8%) and with hyperkalemia 31 (15.8%) of the patients. The lowest values of pH were 6.80, base excess was -30 mmol/L, urea up to 18 mmol/L. The rehydration was done based on the clinical assessment of dehydration grade and correction of electrolyte disorder, types of dehydration, correction of metabolic acidosis and antidiarrhoeal diet.

Conclusion Severe dehydration caused by acute diarrhea at our patients was accompanied with the severe electrolytic and acidobasic disorder and still represents the medical and social problem in Kosovo.

699 ROTAVIRUS GASTROENTERITIS AMONG CHILDREN UNDER FIVE YEARS OF AGE IN KOSOVO

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Background Infective diarrhea is a common disease in children under age of five in Kosovo. The most common cause are viruses and among them rotavirus is leading.

The aim of this study was to reveal epidemiological and clinical data of the disease and discuss implemented modes of treatment.

Methods The medical records of children aged 0–5 years hospitalized with acute gastroenteritis in our facility between 1 January 2011 and 31 December 2011 were retrieved.

Results Of 1011 patients hospitalized in the study period, 116 were rotavirus positive (11.47%). Of all patients, 74.4% were boys and 82.75% up to one year old. The average age for patients was 16.38 months. Eutrophic were 61.12% patients, with first grade hypotrophy were 21.5% patients and with second grade hypotrophy 7.7% patients. All patients presented with diarrhea, 97.41% had vomiting and 43.96% fever at the admission. 70.7% of patients had moderate dehydration and 29.3% severe dehydration. Only somewhat less than one third of the patients in study were not treated with antibiotics (36.2%) and somewhat less than every fifteen was given blood and blood derivatives (6.9%). Every fifth patient in the study had associated disease. All patients were treated successfully.

Conclusion Rotavirus is responsible for significant portion of the acute diarrhea in Kosovo.

700 EASY DIAGNOSTIC METHOD FOR MACRO-AST

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Introduction Macro aspartate aminotransferase (macro-AST) has rarely reported as benign cause for increased plasma AST activities (ASAT). Highly specialized chromatography or electrophoresis were proposed for diagnosing macro-AST. We aimed to present a easy method for macro-AST.

Case Report We report here three cases of 18-month-old and 11-year-old two girls and 5-year-old boy with an isolated chronic asymptomatic elevation of the plasma ASAT. Our patients had no relevant past medical history and no family history of liver pathologies. They have high AST levels respectively 64 IU/L(0–40), 123 IU/L, 75 IU/L. They did not have hepatomegaly or splenomegaly. Several and regular controls of the liver function tests confirmed the asymptomatic isolated elevation of ASAT with values varying between 50 and 120 IU/L. The viral serologies for hepatitis were always unremarkable. ASMA, LKM, ceruloplasmine, anti-gliadin antibodies, TSH, FT4, alpha-1 antitrypsin and abdominal sonographic imaging were normal. We took blood two tubes of 1 ml of blood samples from each patients and from 3 healthy controls. We studied AST levels of one tubes and other tubes were studied after 6 days of refrigerated storage (4° C). We reported 1–3% of loss of AST activity in our patients and 30–35% of loss of AST activity in control group (Table 1). As a result very low loss of AST activity of our patients supported that our patients have macro AST.

	18-month-old	Healthy control	11-year-old	Healthy control	5-year-old	Healthy control
First AST	120IU/L	31IU/L	89IU/L	23IU/L	78IU/L	34IU/L
Second AST	118IU/L	20IU/L	88IU/L	15IU/L	78IU/L	28IU/L

Abstract 700 Table 1

Conclusion Physicians should be aware of macro-AST as a cause of plasma AST activity elevations. Several laboratory techniques were proposed for diagnosing macro-AST. Some require highly specialized chromatography or electrophoresis. Other have more simple procedures based on immunoprecipitation of macroenzymes by polyethyleneglycol. There was a simple method as we reported in our three patients.

701 BURDEN OF ROTAVIRUS GASTROENTERITIS AMONG HOSPITALIZED INFANTS IN ROMANIA

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Background and Aims The rotavirus infection is a major cause of acute diarrhea in young children. The study aimed to evaluate the impact on healthcare and the economic burden associated with rotavirus gastroenteritis in infants, looking at incidence, disease severity and hospitalization costs.

Methods We conducted an observational, retrospective study which included children younger than one year, hospitalized with rotavirus gastroenteritis in the Department of Pediatrics in "Grigore Alexandrescu" Emergency Children's Hospital from January until June 2011. From the medical records we extracted: month of admission, age and sex, history of the disease, clinical characteristics, data on hospital course and costs of hospital stay. Vesikari severity score was calculated for each patient (score ≥ 11 = severe infection).

Results We selected 429 infants hospitalized with acute diarrhea from a total of 11383 patients admitted in our department. The study included 247 infants with rotavirus gastroenteritis (2.17% of all children hospitalized). The percentage of rotavirus diarrhea was 57.6%. The highest incidence of rotavirus infection was recorded in January (78%). Mean age was 7 months and 62.3% of infants had severe diarrhea. Mean severity score was 11.3. Nosocomial infection represented 25.5% of cases. The mean duration of hospitalization was 6.4 days; the average cost for hospitalization was 581.3 euros/patient.

Conclusions The rotavirus infection represented the etiology of acute diarrhea in more than half the cases. We report a high percentage of severe gastroenteritis and a significant percentage of nosocomial rotavirus diarrhea. The considerable medical costs should justify prevention through vaccination.

702 THE ROLE OF ROTAVIRUS IN ACUTE GASTROENTERITIS A STUDY IN THE ISLAMIC HOSPITAL/AMMAN/JORDAN

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Objective

1. To study the microbial pattern of AGE in Jordan.
2. To emphasize the importance of Rota virus in the etiology of AGE.

Methods All cases of AGE admitted to our pediatric department/ Islamic hospital in 2008 were retrospectively reviewed for the results of stool tests, age, sex, duration of stay in hospital and the main symptoms.

Results A total of 1378 cases of AGE were admitted in 2008.

Confirmed diagnoses by stool testing in 570 cases (42%)

Stool tests were negative in 784 cases (58%)

Rotavirus cases = 485 (35%)

Adenovirus cases = 42 (5%)

Entameba histolytica cases = 35 (1.5%)

Bacterial (shigella sp., salmonella sp.) cases = 8 (0.5%)

Rotavirus was found in 85% of all stool +ve cases.

M/F = 1.15:1

Age: < 1year = 52%, 1–5years = 39%, > 5years = 9%

Mean hospital stay = 2.5 days.

Presentations: fever (70%), vomiting (85%), diarrhea (96%)

Mortality: zero%

Conclusion AGE is a major cause of hospital admissions in Jordan.