THEYROID CANCER PATIENT’S FERTILITY AFTER
RADIONUCLIDE THERAPY

Kristina Vabalayte*, Anatoly Romanchishen. St. Petersburg State Pediatric Medical University, St. Petersburg, Russian Federation

Background For patients with differentiated thyroid carcinoma (DTC), the effect of radioactive iodine (RAI) therapy on gonadal and reproductive function is an important consideration.

Objective and methods 127 children were operated on thyroid in case of DTC during 1975-2015. 87 pts were treated by RAI (1–13 times). Average age is 15 years (4–18). Histological types of DTC were papillary (69%), follicular (27%), other (4%). Average follow up period is 3 year (2–40). We analyzed effect of therapeutic RAI on sex steroid level; on ovarian function, menses, ovulation in women; sperm in men; future fertility; pregnancy outcomes.

Results Early side effects (during 1st week after RAI) included nausea and vomiting (29%), sialoadenitis (22%), temporal bone marrow dysfunction (6%). Late side effects included permanent salivary glands (2%) dysfunction (2%), permanent bone marrow dysfunction (4%), lung fibrosis (5%), second tumors – leucosis, breast cancer (4%), fertility disorder (7%). Fertility was analyzed in 78 pts. Sterility (2%), amenorrhea (4%), changes in menstrual period (5%), miscarriage (4%).

Conclusion RAI should be prescribed only for indications. Sexual cell should be cryopreserve before RAI.

REVIVAL OF A NEWBORN SCREENING PROGRAM IN THE PEOPLE’S DEMOCRATIC REPUBLIC OF LAOS

1Thomas Hoehn*, 2Bounnack Saysanasongkham. University Hospital Duesseldorf, Duesseldorf, Germany; 3Ministry of Health, Vientiane, Lao, People’s Democratic Republic

Background Neonatal screening programs have been established and are in use in most countries worldwide. Laos belongs to the few countries which still have not established any kind of newborn screening.

Description Participants of an initial pilot project between 2008 and 2010 were the large maternity hospitals within the city of Vientiane (Mahosot Hospital [2,500 deliveries], Sethathirath Hospital [2,000 deliveries], Friendship Hospital [700 deliveries], and Mother & Child Health Hospital [3,500 deliveries]). Samples were taken immediately prior to hospital discharge and once weekly air-shipped to a German screening laboratory.

Lession learned Altogether 11,362 samples of newborn infants have been examined. The rate of retests was above European average due to very early discharge policies in Laotian maternity hospitals. Confirmed cases of neonatal congenital diseases included two infants with hypothyroidism and one infant with congenital adrenal hyperplasia without salt-loss. All three infant received early therapy and are currently doing well.

Next steps To re-establish newborn screening in a sustained manner following the demonstration of feasibility during the pilot project. Newborn screening for TSH will be initiated in early 2019 in all delivery hospitals in the urban area of Vientiane, capital of Laos. As opposed to the pilot project, measurements in the lab will take place within the country at the laboratory of the largest delivery hospital in Vientiane, the Mother & Newborn Hospital.
Key literature was assessed around a number of themes:

- Alcohol concentration in breast milk and time to elimination
- Level of potential alcohol exposure in the breastfeeding infant
- Effects on infant feeding, sleep and neurodevelopment

Methods A research request was made through the HSE Library Service to source relevant literature. Keywords in the search strategy included ‘breastfeeding’, ‘breast milk’, ‘alcohol’, ‘ethanol’, ‘infants’, ‘paediatric’. Multiple databases were searched: Scopus, Pubmed, Embase, Web of Science, Cochrane, Cinahl, PsycINFO, Science Direct, and Clinical Key.

Titles and abstracts were assessed against pre-specified inclusion criteria. Full-text articles for studies meeting the inclusion criteria were retrieved for in-depth review. CASP checklists were used to assess study quality.

Results 3 systematic reviews and 27 observational studies were identified.

Alcohol level peaks in breast milk about 30–60 minutes post-ingestion.

2 hours required, on average, to metabolise 1 standard drink. Breast milk will contain alcohol until this time has elapsed.

If an infant were fed at peak alcohol concentration it will receive only about 3% of the maternal ‘dose’.

No significant effect on the amount the infant drinks at the breast. It may result in more interrupted infant sleep. No effect on neurodevelopment.

Key messages Avoid alcohol in the first month postpartum as feeding is very frequent and it takes time to establish a routine.

For women breastfeeding beyond 1 month:
- Continue to adhere to guidance on low-risk alcohol consumption.
- Feed your baby before having a drink.
- Express milk before drinking alcohol. This will allow you to feed your baby if they need feeding before you are ready.

Conclusion This review provides an important update to HSE advice on alcohol use and breastfeeding. Our findings have since been incorporated into new user-friendly guidance, available at askaboutalcohol.ie, breastfeeding.ie and the recently launched mychild.ie. The information presented is consistent throughout to ensure robust, clear and transparent advice.

P303 A MULTICENTRE HEALTH PROMOTION STUDY, EXAMINING PARENTAL KNOWLEDGE OF AND REDUCING EXPOSURE TO PASSIVE SMOKING (REPS)

1Sheena Coyne*, 2,3Michaela Pentony, 1Juliette Lucy, 1Navdeep Kaur Brar, 1Bazlin Ramly, 1University Hospital Waterford, Waterford, Ireland; 2Our Lady of Lourdes Hospital Drogheda, Louth, Ireland; 3Temple Street Children’s University Hospital, Dublin, Ireland

The harmful effects of environmental tobacco smoke on the paediatric population is well documented in the literature. The aim of this study is to examine the existing parental knowledge between passive smoking and increased rates of paediatric hospitalisation and to provide an intervention in the form of referral to a smoking cessation programme.

A pilot study was conducted in a tertiary paediatric centre. This prospective cohort study recruited thirty-six paediatric patients presenting with respiratory tract infections. Consenting families were asked seven questions regarding their smoking habits. Following completion of the pilot study a further fifty patients from two level two paediatric centres were identified. In the level two centres focus was narrowed to children directly affected by passive smoking. Parents accepting referral to a twelve-week smoking cessation programme are currently being followed up over a six-month period. In the case of parents declining a referral to smoking cessation, a reason for refusal was also sought.

From the pilot, although most claimed a desire to quit smoking, acceptance of referral to the smoking cessation programme was poor. Results from the level two centres where the service is offered on site reflected better uptake with 52% (26/50) accepting a referral to smoking cessation services. Over the three centres only 69% of parents claimed an awareness of the harmful effects of environment tobacco smoke with a wide variation between different geographical areas. Results comparing the three centres are demonstrated in the table below.

P304 THE CASE OF PERTUSSIS IN NEWBORNS AND INFANTS: THE EPIDEMIOLOGY THAT ‘COUNTS’ IN VACCINATION CHOICES

1Federico Marchetti, 2Claudia Guidduci; 1Lorenzo Mambelli*. 1Department of Pediatrics, S. Maria delle Croci Hospital, Ravenna, Ravenna, Italy; 2University Hospital Arcispedale Sant’Anna, Ferrara, Italy

From June to August 2018, 6 infants with pertussis aged between 1 and 9 months (4 were 3 months old, the other two 1 month and 9 months old respectively) were admitted to a General Paediatrics Operating Unit. Their hospitalization period lasted between 3 and 11 days (mean 7.2 days). Three infants required oxygen therapy. No