blood results revealed platelet count of 1. The rest of his blood results were essentially normal.

On examination, extraoral facial, limb and trunk bruising were noted. Lips were crusted with blood and surrounded petechiae. Intraoral examination revealed soft palate petechiae, areas of ulceration/petechiae in the left and right buccal mucosa and a minor bleed from the lower left lateral primary incisor. The findings were consistent with a diagnosis of Immune Thrombocytopenia Purpura (ITP) precipitated by a viral infection. Initial treatment was with tranexamic acid for five days. On review, there was a marked improvement noted with only minimal blood crusting of the lower lip and fewer intraoral petechiae evident. No further treatment has been required to date. The child is being monitored by haematologist and dental specialists with regard to signs, symptoms and progress.

ITP is a haematological disorder defined by low platelet count. Children often develop this following a viral infection. Spontaneous bleeding or bleeding induced by trauma, may be the first clinical signs of ITP. This interesting case highlights a primary presentation of ITP with oral signs. This situation may present to a General Dental Practitioner or General Medical Practitioner in community or another Healthcare Professional and it is important to recognise the signs and symptoms and intervene appropriately.

P342 **CLINICAL COURSE IN CHILDREN DIAGNOSED WITH HEREDITARY SPHEROCYTOSIS IN ALBANIA**

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**Objective** To describe the clinical spectrum of children diagnosed during 15 years with hereditary spherocytosis, classify them on 4 groups based on their clinical data and evaluating their outcome and giving our recommendations for their management.

**Methods** This is a analytic, observational, retrospective and case-control study analyses of 30 children diagnosed and followed up at our center during 15 years (2003–2018). The patient were diagnosed with hereditary spherocytosis based on their clinical history, clinical examinations, and on a positive osmotic fragility curve. They were divided based on the clinical form on 4 groups: mild, moderate, moderate to severe and severe group. The groups were compared between them regarding the laboratory data, the need for transfusion, cholelithiasis, splenic sequestration, aplastic crises and splenectomy.

**Results** In our study 3 patients had mild H.S (10%), 10 patients had moderate H.S (33.3%), 10 patients had moderate to severe H.S (33.3%) and 7 patients had severe H. S (23.4%). The mean age at diagnosis was 4.7 years Patient with severe form were younger than patients with moderate form (p=0.016) and had lower hemoglobin level (p≤0.001), higher reticulocyte count (p=0.049) and also needed more transfusions (p=0.002). There was not found a correlation between the level of bilirubin and clinical gravity (p=0.873). Splenic sequestration was commonly found, 63.3% of patients experienced a splenic sequestration and its frequency was significant higher in severe patients (p=0.011). Cholelithiasis was present in half of the patients but its development was not related with disease’s severity (p=0.391). Aplastic crisis was relatively rare, only one patient developed aplastic crisis and it was due to parvovirus infection. Splenectomy was performed in 16 patients (53.3%) with the main indication transfusion dependence and splenic sequestration.

**Conclusion** We have a high number of children with severe clinical forms because as they do severe forms they came at our center and are diagnosed compare with mild forms which are asymptomatic and remain undiagnosed. The clinical course of our patients was relatively benign, but we still have a high frequency of splenic sequestration 63.3% (most of them due to recurrent infections) a high rate of blood transfusion (54%) and a high number of splenectomised patients.

P344 **A RARE ASSOCIATION: ACUTE DISSEMINATED ENCEPHALOMYELITIS IN CHILD AFFECT BY AUTOIMMUNE HAEMOLYTIC ANAEMIA AND AUTOIMMUNE THROMBOCYTOPENIA**

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Acute disseminated encephalomyelitis (ADEM) is an inflammatory demyelinating illness, characterizezed by a