pain on right side. Blood exams showed rise of CRP (19 mg/L) and normal WBC. An ultrasound performed in the A&E department was normal. Because of the persistence of pain, we repeated an ultrasound the day after that showed an anechoic uniloculated 18 mm cyst at the level of the right ovary. The report was of functional follicular cyst.

After two days of observation and worsening of the symptoms, laparoscopy was performed: a necrosis of the fimbrae due to torsion at the right fallopian tube infundibulum was found. The ischaemic fimbrae were removed according to Kroener fimbrictomy. Hysteroscopic analysis described fimbrae characterized by oedema and vascular congestion.

**Discussion**

Torsion of infundibulum could mimic a functional aneissal cyst, with a normal echogenic appearance, while a torsion of the whole Fallopian tube can be more easily detected and suspected, avoiding delayed treatment. In our case, to base the management on clinical symptoms was mandatory.

**Conclusions**

Isolated torsion of infundibulum of Fallopian tube is a challenging diagnosis. It should be considered in case of acute lower abdominal pain in young girls. Early laparoscopy seems to be the best approach for diagnosis and treatment.

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**OSTEOYLTIC LESIONS OF THE CALCANEUS IN PAEDIATRIC PATIENTS: RESULTS FROM A MULTICENTER STUDY**

A Frings, D Andreou, F Machacek, B LieglAtzwanger, M Zackerl, M Zacherl, R Windhager, A Leithner.

Tumours of the calcaneus are exceedingly rare. X-rays are the standard examination tool and therefore we wanted to evaluate if X-rays alone were sufficient for proper diagnosis. Diard’s classification was applied to define whether different types of lesions were characteristically distributed in the bone and in addition we analyzed whether type and/or duration of symptoms were possible indicators of malignancy.

Sixteen patients (12 male, 4 female; mean age 15 years, range 8 to 20) were identified. The definitive diagnosis was simple bone cyst (n=10), aneurysmatic bone cyst (n=3), intraosseous lipoma (n=1) and Ewing’s Sarcoma (n=2). Parameters analyzed were type and duration of symptoms, tentative diagnosis, operative procedure, recurrence rate, revision and localization of the lesion according to Diard.

The main current complain was of pain without prior history of trauma in twelve cases. Symptoms preceded the definitive diagnosis for a mean time of seven (range 1 to 26) months. Discrepancies of the radiological and definitive diagnosis occurred in four of 16 cases. Applying Diard’s system trabecular area number 6 was affected in 14 of 16 cases. We did not observe local recurrence for benign lesions.

In each case of an osteolytic lesion of the calcaneus a malignant tumor must be ruled out and thus, plain X-rays in two planes alone are not sufficient and should therefore be followed by MRI. Applying the Diard system different types of lesions are not characteristically distributed in the bone. Increasing pain without previous trauma should always justify further examinations.

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**SOCIAL INEQUALITIES IN ADOLESCENT HEALTH**

PF Freitas, MP Domingues.

Objectives To investigate how socioeconomic indicators and individual variables from woman, pregnancy and delivery, can interact to influence rates of adolescent pregnancy in South Brazil.

Methods Information from the Live Birth National Information System (SINASC), concerning 419,272 deliveries taking place in the State of Santa Catarina, South Brazil, from 2003 to 2007 were analysed. The study combined ecological and cross-sectional methods of data collection and analysis. Correlations between socioeconomic indicators and rates of adolescent pregnancy were obtained. Annual rates and crude and adjusted rates, using Cox Regression, were calculated for literacy, ethnicity, duration of pregnancy and frequency to antenatal care consultations.

Results Rates of adolescent pregnancy for the 293 states of Santa Catarina in the study period was 18.26% decreasing linearly from 2003 to 2007. The study combined ecological and cross-sectional methods of data collection and analysis. Correlations between socioeconomic indicators and rates of adolescent pregnancy were obtained. Annual rates and crude and adjusted rates, using Cox Regression, were calculated for literacy, ethnicity, duration of pregnancy and frequency to antenatal care consultations.

Conclusions Adolescent pregnancy in Brazil is an important Public Health problem with socioeconomic determinants, whose effects will impact mainly those women living in the less privileged groups.
This article discusses children and adolescents who have been the victims of sexual abuse. It focuses on the special role that physicians play in identifying such children and protecting them with initial support and assistance. The article discusses the short and long-term effects of childhood sexual abuse, including the physical and emotional impact of sexual exploitation and severe neglect. It presents the effect of this phenomenon on the victims, and how they express and deal with their trauma. It is important for physicians and other medical professionals to be sensitive to the possibility of children being abused, scared, or threatened. It is important to note that if the abusers are members of the child’s family, it requires double attention and it’s necessary to involve other welfare authorities. In such a case the physician plays a double role - a health provider and supportive figure. The article also includes a discussion of effects that are manifested when the victim has grown to adulthood, such as personality disorders. The method used to treat these abused children is to bring forth loved ones to mitigate the effect of the injury and help the victim deal with the painful feelings it engenders. The purpose of this paper is thus to draw the attention of teachers and school counselors to the importance of identifying these abused children so as to be able to rehabilitate them and allow them to develop properly, as the sexual abuse of children damages not only their present but also their future development.

**Background and Aims** Following the tragic death of Victoria Climbie in 2003, Lord Laming produced a report setting out a number of recommendations aimed at improving Child Protection (CP) practices throughout the UK. We decided to review our practice in a District General Hospital in Northern Ireland to determine whether recommendations from previous CP audits were implemented, and in addition check our compliance with the Laming recommendations.

**Methods** We performed a retrospective chart audit on CP cases presenting to our paediatric department between September 2008 and March 2010. Using recommendations from previous audits and Lord Laming we defined our standards and devised a pro forma for collecting data.

**Results** Our targets were achieved in a number of areas, in particular medical note keeping, use of CP illustrative templates, documentation of telephone exchanges and face to face discussions, the presence of Nursing Progress Notes, identification of the child’s consultant and GP in the medical notes and documentation of results of investigations. We failed to meet our objectives relating to certain aspects of communication, especially taking a history from the child, proper use of interpreters, documenting consent, informing social services in writing and documenting review arrangements.

**Conclusions** Progress has been made in how we manage these difficult and sensitive child protection cases. However, we have identified a number of areas where we can improve upon our current practice, and have made recommendations that we hope will further aid in safeguarding our children in the future.