Introduction A topic dermatitis and obstructive bronchitis are very often in our doctor’s office and these diseases require strong commitments, frequent examinations and allergy tests.

Objective Association of atopic dermatitis and obstructive bronchitis in children at age of 0–3 years.

Material and Methods We processed the data for 476 children treated during the period of 3 years. We used the data from childrens medical records, laboratory tests and reports of pulmo-allergy examinations. For processing the data we used analytic and descriptive method.

Results We processed the data for 476 children at age of 0–3 years for the period from 2009–2011. We found atopic dermatitis in 141 children (29.6%), atopic dermatitis associated with obstructive bronchitis in 63 children (44.6%). Family anamnesis was positive in 36 children (60.9%). The results from laboratory tests showed that the total IgE had increased in 54 children (67 children were tested). Eosinophiles were increased in all of them and we found positive specific IgE in 25 children (42 children were tested). We put 35 children on antihistaminic prevention. We used bronchodilators in the treatment of acute attacks. All of the children who have increased IgE and positive specific IgE are examined regularly, not only from the family physicians, but also from pediatric pulmonologists. So, the percentage of hospitalized children is about 1.5%.

Conclusion Early diagnosis and laboratory detection of atopic dermatitis and obstructive bronchial diseases as well, are of great importance for normal growth and development of children.

Abstracts

INFLUENCE OF HALOTHERAPY ON OXIDANT-ANTIOXIDANT PROCESSES IN CHILDREN WITH DERMATO-RESPIRATORY SYNDROME AT THE PERIOD OF EXACERBATION OF ATOPIC DERMATITIS

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Methods 69 children aged from 2 to 15 years old with DRS. The group was made of 35 children with DRS, received traditional complex of medicinal measures with included halotherapy - treatment under the conditions of artificial microclimate of saline caves.

Results of investigation and conclusions The analysis of the data obtained allowed to reveal that children in the period of atopic dermatitis exacerbation manifest a considerable increase in the intensity of oxidant processes on admission relatively-DK-1,3±0±0,015; MDA-2,02±0,023; OMP%/ of protein 55±0,121; OMP Units of optic density/1 gr protein - 0,526±0,025 OMP/1 ml serum - 3,50±0,41; MPP 1- 0,598±0,047; MPP 2- 0,600±0,006 (p<0,005) and decrease antioxidant processes KAT- 16,2±1,67 mmol/ml; AABS- 0,2±0,83 mmol/ml. On discharge the indexes in both groups of children lowered, had reliability with control, only in group of children receiving halotherapy relatively DK- 0,878±0,015; OMP%/ protein - 48±0,087; OMP Units of optic density/1 gr protein - 0,459±0,015, OMP/1 ml serum - 2,94±0,12; MPP 1- 0,250±0,015; MPP 2- 0,325±0,008; KAT- 36,57±0,37 mmol/ml; AABS- 0,662±0,78 mmol/ml (p<0,005). Halotherapy possesses antioxidant action and we recommend to include it into the complex of treatment of children with dermato-respiratory syndrome, in exacerbation of atopic dermatitis on the stage of in-patient department.

MATERNAL AND ENDOGENOUS IGA PROTECTION IN INFANTS WITH RESPIRATORY TRACT INFECTIONS

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Background Intestinal IgA protection in infants relies both on maternal human milk sIgA (secretory immunoglobulin A) controlled by chemokines like CCL28, with roles of amplifying mammary secretion and passive gut epithelium transfer, and endogenous production. Probiotic strains from human milk and their substrate oligosaccharides derived from lactose may stimulate local Ig A production in infants.

Objectives Assessing the levels of IgA in human milk and in infant’s serum and lactosis levels from human milk, in breastfed infants with respiratory tract infections.

Methods We have evaluated 40 pairs mother-infant, healthy mothers, infants with respiratory tract infections. Human milk samples were analysed for physical and chemical properties on an ultrasonic infrared spectrometric analyser (ph, temperature, density, conductivity, fat composition, lactosis levels). Ig A, Ig M, Ig G levels and protein profiles from human milk were measured after centrifugation by immunoturbidimetry method on a spectrophotometer and by protein electrophoresis with cellulose acetate membrane respectively. Serum Ig A, Ig M, Ig G levels from infants were determined using the same immunoturbidimetry method. Pearson correlations were studied in accordance to study’s objectives.

Results Positive correlations statistically significant (p<0.05) were found both between serum IgA and Ig G and human milk IgG.