in Knowledge of mothers about breast feeding, 42.5% had good knowledge, 56.5% had average knowledge.

Conclusion Raise awareness of breast-feeding mothers than exclusively breastfeeding, were the important health priorities in the health of children.

feeding, breastfeeding, attitudes, mothers, infants

DILATIVE CARDIOMYOPATHY - CASE REPORT

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Background and Aims Dilatative cardiomyopathy/DC is a myocar-
dial disease characterized by increased dimension of heart
cavities and general weakening of the systolic function/the most
frequently of the left ventricle/, with erosion ofsymptoms and
signs of a cardiac insufficiency. Etiologically, there are family and
genetic factors. Manifestations of the disease at infants are feeding
problems, difficult and accelerated breathing and excessive sweat-
ing. Older children complain of fatigue, difficult breathing and
hacking. It can also be asymptomatic and discovered at occasional
medical examination with an x-ray finding of cardiomegaly or elec-
trocardiogram changes, or with an appearance of an unspecific
symptom, as was the case here.

Methods Data analysis of the case history of the patient with DC.
Anamnestic data, laboratory analysis and data through clinical diag-
nostic procedures of reference institutions are used as work meth-
ods. Purpose is to show the patient with a diagnosed DC with an
initial unspecific symptom.

Results The work show a boy old 14 with dyspnea as the only
symptom. Forth child of the fifth normal pregnancy/death of the
two-month old sister caused by a heart condition of unknown etiol-
y/. Slowed development as infant, frequent respiratory infec-

TV100/60mmHg, CP100/min, sO290%. X-ray: cardiomegaly. In

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TA100/60mmHg, CP100/min, sO290%. X-ray: cardiomegaly.

In competent institution diagnosis is affirmed.

Conclusions Initial clinical presentation of the disease at patients
with DC can be characterized by unspecific respiratory distur-
bances, as was the case with this patient. Echocardiography remains
a sovereign method in establishing the diagnosis. In the future,
endomyocardial biopsy is expected to offer decisive data regarding
the etiopathogenesis of this condition which would enable a timely
causal medication therapy and avoid surgical therapy.

THE INFLUENCE OF BETA-BLOCKER (BISOPROLOL) ON HEART RATE VARIABILITY IN CHILDREN WITH MITRAL
VALVE PROLAPSE

1L Romanici; 2M Revenco. Pediatrics Department, State Medical and Pharmaceutical University ‘N. Testamentanus’; 3Pediatrics Department; 4Research Institute for Maternal and Child Healthcare, Chisinau, Moldova

The carried out research has included 50 children: I group (bisopro-
lol)-60% children and II group (placebo) - 40.0%, average age
(13.5±0.60) years; doses of bisoprolol (FO): 1.25–2.5mg/kg/dose.

ECG monitoring has defined heart rate average maximum and
minimum value in the beginning of research and in dynamics a
month later. Dynamics in a month of action of a bisoprolol has not
changed the minimum values of heart rate in the first group in com-
parison with placebo (p>0.05), but has lowered the maximum val-
ues of heart rate reductions at children with MVP (~3.74, p<0.01)
in the first group in comparison with placebo (0.55; p>0.05) and
average values of heart rate (~4.70; p>0.001) in the first group in
comparison with placebo (~0.10, p>0.05). Statistical parameters
HRV (SDNN and PNN 50) defined in the beginning in both groups
did not differ considerably (p>0.05). Dynamics in a month of action
bisoprolol on indicators HRV was showed by decrease in value PNN
50 in the first group (~6.42; p<0.001).

Results of research have revealed, that at children with MVP, biso-
prolol has considerably reduced heart rate (~8.9; p<0.001) in com-
parison with placebo, without influence on systolic and diastolic
blood pressure. Influence bisoprolol on indicators HRV in the first
group it was characterised by decrease of statistics PNN 50 charac-
teristic for activity of sympathetic vegetative nervous system
(~6.42; p<0.001).

EXPLAINING THE RELATION OF SOCIOECONOMIC STATUS TO CHILDHOOD BLOOD PRESSURE. THE ABCD-STUDY

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Objective We investigated the association of socioeconomic status
with blood pressure and prehypertension in childhood.

Methods In a prospective cohort study (ABCD-study) we obtained
blood pressure measurements and information on potential explain-
ing factors, namely birth weight, breastfeeding duration, and body
mass index (BMI) in 3067 children of 5–6 year of age.

Results The systolic- and diastolic blood pressures of children from
mid-educated women were 1.0 mm Hg higher (95% CI 0.4–1.7) and
0.9 mm Hg higher (95% CI 0.3–1.4), and the blood pressures of chil-
dren from low-educated women were 2.2 mm Hg higher (95% CI
1.4–3.0) and 1.7 mm Hg higher (95% CI 1.1–2.4), compared to chil-
dren from high-educated women (models controlled for age, gender,
height, and ethnicity). Children of mid- or low-educated mothers
were also more likely to have prehypertension (p90; 21% and 27%)
compared to children of high educated mothers (13%). In addition,
these associations could partly be explained by birth weight, breast-
feeding duration, and BMI, but remained significant following
adjustment for these variables. Income adequacy was less clearly
associated with prehypertension, even after including potential
mediators.

Conclusion The socio-economic status related differences in blood
pressure seem to emerge from childhood as the results show a higher
blood pressure and more prehypertension in children from lower
SES. Improving birth weight, breastfeeding duration, and BMI,
might help decreasing the socio-economic disparities, but other fac-
tors might also play a role.

SEPARATING THE ASSOCIATIONS OF PROGRAMMING AND TRACKING DURING INFANCY WITH CHILDHOOD BLOOD
PRESSURE, THE ABCD STUDY

1M de Beer, 2M van Eijsden, 3T Vrijkotte, 4C Fall, 4C Osmond, 1R Gemke. Pediatrics, VU University Medical Center; 2Epidemiology, Documentation and Health Promotion, Municipal Health Service; 3Social Medicine, Academic Medical Center, Amsterdam, The Netherlands; 4MRC Lifecourse Epidemiology Unit, Southampton General Hospital, Southampton, UK

Background and Aims In a prospective pregnancy cohort study,
we investigated the association of early growth with blood pressure
at 5–6 years of age.

Methods We investigated the association of early growth with
blood pressure during infancy with childhood blood pressure.

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