Purpose To determine risk factors (RF) and their relationship with life-threatening infection (LTI) in children with febrile neutropenia (FN).

Method In this cross-sectional study, from December 2008 to November 2009, all children with FN admitted to Dr Sheikh Pediatric Hospital were enrolled. For each patient, demographic, clinical and laboratory data were recorded and they were followed up for occurrence of LTI.

Results 120 episodes of FN in 68 patients were analyzed. The most common underlying disease was Acute Lymphoblastic Leukemia (ALL) (53.3%), 9 (7.5%) died from an infection and 35 patients (29.1%) had a LTI. Five variables were identified as risk factors for LTI i.e. body temperature ≥39°C (p<0.000), presence of mucositis (p=0.000), abnormal chest x-ray (p=0.001), platelet count less than 20000/mm³ (p=0.000) and absolute neutrophil count less than 100/μm³ (p=0.001).

Risk of LTI was increasing according to number of RFs presented at the beginning of admission (from 2.8% in patients without RF to 100% in patients with 5 RF).

Data mining analysis showed relationship between risk factors with platelet count as the most important variable in the high risk group for LTI.

Conclusion Evaluation of important RFs and judging the severity of patients’ condition by studying the importance and relationship between RF at the time of admission can be a useful method for screening LTI in children with FN.

Introduction Kawasaki disease (KD) is an acute self-limited vasculitis that can become fatal if left untreated. The aim of this study was to identify the risk factors associated with the development of coronary artery lesions (CAL) in pediatric patients with KD.

Methods We performed a retrospective chart review of pediatric patients diagnosed with KD who were admitted to King Abdulaziz University Hospital, Jeddah between January 2001 and December 2011. Descriptive statistics was performed using the Statistical Package for the Social Sciences.

Results Forty-four patients were diagnosed with KD. There were 27 (61.4%) boys and 17 (38.6%) girls. The mean age of the patients was 26.7 months (range 1.5–108 months). Twenty-three patients (52.3%) had complete Kawasaki, while 21 (47.7%) had incomplete KD. CAL were found in 16 patients (61.5%) with incomplete KD and in 10 (38.5%) with complete Kawasaki (p=0.05). CAL were more frequent in males (p=0.045), in the 1–5 year age group (p=0.045), in children with fever of more than 5 days (p=0.01) and in children who received intravenous immunoglobulin (IVIG) 10 days after the onset of fever (p=0.05). There was no significant relationship between CAL and nationality and other clinical systemic manifestation. There was no relationship between laboratory findings and the development of CAL before and after IVIG administration.

Conclusion CAL are more frequent in patients with incomplete KD. Risk factors for CAL are age between 1–5 years, male gender, and fever of >5 days duration. Early administration of IVIG reduces the frequency of CAL in patients with KD.

Introduction Anaemia, leucopenia and thrombocytopenia have been rarely reported in patients receiving methylphenidate. There is no recommendation for routine blood testing unless clinically indicated. We report two children who developed reversible neutropenia on treatment with methylphenidate.

Method-case reports Case1: Routine blood test in a 14 year old boy with ADHD on Concerta XL 54 mg daily showed significant neutropenia (white cell count (WCC) - 3.1, neutrophil count - 0.8). The count was further reduced to 1.55 after a month. There was no history of any viral infection during or immediately before this period. Neutrophil count normalised 1 month after stopping medication.

Discussion Methylphenidate is the most commonly prescribed stimulant for ADHD. There are wide variation in haematological
monitoring. A literature review indicates that previous clinical trials have failed to demonstrate statistically significant occurrence of serious haematological abnormalities. Our experience shows that neutropenia can indeed be a serious side effect. In both cases, prompt reversal of neutropenia was observed upon discontinuation. Given the cost and discomfort associated with routine investigations, we recommend large multicentric observation studies with the aim of creating a unified standard.

CHILDOOD MENINGITIS (EXPERIENCE OF THE PEDIATRIC DEPARTMENT FOR A YEAR)
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Introduction Meningitis is one of concern in Pediatric Infectious Diseases ict with impact, the Epidemiological Profile, ic severity in the short and long term Especially if it is Caused by bacteria, and Especially the interest of her proper care. Objective Evaluate the epidemiology, bacteriology, etiology of meningitis and How They support and Their Future: Material and Methods A retrospective study of records of patients hospitalized in the Pediatric University Hospital DURING 2010 BATNA, 70 Patients Were the subject of this study. Results Both sexes are Affected with a male predonance. The Age Group Most Affected is 30 days to 05 years 55.71% (range of 30 days and 15 years).
A marked Increase in incidence Between April and August (61 boxes).
Fever WAS Noted in 100% of our patients, 32 patients complained of headache. The neck stiffness WAS Noted in 13 patients, 02 patients presented seizures.
Cytological CSF study objectified That HAS 57% of patients Had a number of elements Between 10 and 500 cells/mm 3 with presence of neutrophils and lymphocytes in 40.4%. The hypoglycorrhachia WAS present in 55.7% of cells, the hyperalbuminorrachia in 31.4% of boxes. Leukocytosis WAS present in 63.33% cells, leuokopenia in boxes 26.66%.
67% Of Our Patients Had a positive CRP, 61.8% Had an ESR. Conclusion Confirmed this study the frequency of meningitis in children. The preponderance of the viral origin Which corresponds to literature.

SALMONELLA ENTERITIDIS MENINGITIS IN A CASE REPORT
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Introduction Salmonella are the usual agents of gastrointestinal infections caused by ingesting food or water contaminated responsible for gastroenteritis, infectious forms with predominant symptoms represent 5–10% of all salmonellosis They occur most often in patients malnourished, immunocompromised or sickle cell.
We report a case of salmonella meningitis complicated by pericarditis and septic shock.
Observation KM infants 3 months old born and residing in Patna, the third in a family of three EVBP, from a consanguineous marriage, was admitted at the pediatric ward on 10–12–2008 for: septic shock whose clinical examination objectified:
an altered state with general pallor CM, grunting, sclerema, bradypnea, tachycardia and mottled extremities neurological syndrome: hypertonia with generalized convulsion a PL which was performed: in favor of a purulent meningitis in Salmonella Enteritidis Inflammation testing strongly positive.

Echodocography: pericardial electrothrombosis HB: hemoglobin C.
Conclusion The salmonella although they are responsible for gastroenteritis often with good prognosis under treatment in certain situations may give serious systemic infections and their prognosis remains reserved hence the interest to look at this type of infection an underlying pathological field.
Annuler les modifications. Dictionnaire.

EPIDEMIOLOGY OF BLOODY DIARRHOEA AMONG CHILDREN LESS THAN TEN YEARS OF AGE IN BAGHD
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Bloody diarrhea in young children is usually a sign of invasive enteric infection that carries a substantial risk of serious morbidity and death Among its important risk factors are poor environmental sanitation, unsafe water, poor personal hygiene & artificial feeding
In Iraq the sanitary condition & general hygiene had been deteriorating during the last decade, particularly following the last war.
Objectives To identify prevalence & risk factors associated with bloody diarrhea.
Methodology Cross - sectional study was conducted. Collecting 1500 children aging < 10 years old, having diarrhea, from two pediatric teaching hospitals in Baghdad. Mothers Interviewing, clinical & stool laboratory examination were carried-out for each patients.
Results Prevalence of bloody diarrhea was (28%). No significant association between sex & bloody diarrhea. Significantly, higher rate of bloody diarrhea among children; aging 7–9 years (66%), living in rural areas (41.9%), their mothers were illiterates (31.5%), household water from river (46.3%) not using refrigerator for food storage (34.1%), and children who were on exclusive bottle feeding (36.5%). While insignificantly higher rate (33.3%) among children of working mothers.
Entamoeba Histolytica was the main causative agents (83.5%), with significant higher prevalence (97.5%) among age group 1–3years. Prevalence of Non-typhoid salmonella or Shigella (4.28%, 2.14%) respectively. were found more among age 4–6 years (42.1%), (15.8%) respectively.
Conclusion Bloody diarrhea highly prevalent in Baghdad (28%). Entamoeba histolytica is the commonest causative agent Non breast fed baby at high risk. Therefore efforts should be directed toward encouraging exclusive breast feeding and, improvement of the basic infrastructures.

ANALYSIS OF THE INCIDENCE OF GIARDIASIS IN CHILDREN WITH ATOPIC DERMATITIS
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Atopic dermatitis holds the first place among children’s allergic diseases. One of its proven ethiopathogenetic factors is parasitosis, affecting the course of dermatoses and leading to frequent recurrences and chronization of dermal processes.
Objective Studying the frequency of atopic dermatitis and giardiasis occurrence in children.
Materials and Methods In 2007–2011, 173 children aged 3–17 have been examined, who underwent treatment for atopic dermatitis in the Clinical Hospital of Simferopol. Their diagnosis were verified based on the patients’ complaints, histories, clinical, biochemical and instrumental examinations.
Discussion Out of 173 examined children, 46 were diagnosed with giardiasis. Apart from typical symptoms of allergy, clinical findings