chain reaction for *Mycobacterium tuberculosis* and were stained for acid-fast bacilli.

**Results** We performed 33 procedures. Median age of children was 56.4 months (13–360). 10 children were diagnosed with pulmonary tuberculosis and another 1 with latent tuberculosis. Mean MOPS score was 4 (range 2–8). The degree of sedation achieved enabled all procedures to be completed without requiring additional drugs. The only side effect registered was transitory euphoria in 6 cases (18%). Sedation was always well accepted by both parents and health workers.

**Conclusions** This study has shown that the combined use of intranasal Midazolam and Ketamine appears to be a safe and effective method to achieve children’s short-term sedation and to facilitate the gastric lavage procedures.

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**EPIDEMIOLOGY OF BACTERIAL MENINGITIS IN TUNISIAN CHILDREN (2000–2011)**

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Bacterial meningitis is associated with high mortality and neurological sequel world wide.

We reported epidemiological characteristics of laboratory confirmed bacterial meningitis in children during 2000 to 2011 period.

We analyzed all laboratory confirmed bacterial meningitis cases. The serotypes and serogroups were determined by slide agglutination. Antibiotic susceptibility was determined by disk diffusion method according to CA-SFM guidelines. Beta-lactamase production was analyzed using cefinase test. MIC of beta-lactams was determined by E-test method (AB BIODISK).

During the study period we have collected 486 cases of bacterial meningitis: 157 cases of *S. pneumoniae* (53.2%), 118 of *N. meningitidis* (42.3%), and 99 of *H. influenzae* (20.4%). Most cases (66.5%) occurred in children under 3 years. The most frequent serotype among *S. pneumoniae* was 14 (27.2%) followed by 23F (9%). The majority of *N. meningitidis* strains belonged to serogroup B (72.9%) and 88.8% of *H. influenzae* strains to serotype b.

Before Hib conjugate vaccine introduction (2000–2002), *H. influenzae* were the first species responsible for meningitis (40%). During vaccine generalisation (2003–2005) we noted a decrease in Hib meningitis. At the beginning of 2006, Hib vaccination was stopped and we observed an increase of Hib meningitis cases. Anti-microbial susceptibility studies show that 43.6% and 60% respectively of *S. pneumoniae* and *N. meningitidis* strains had reduced susceptibility to penicillin. Among *H. influenzae* 47.3% was beta-lactamase producing.

The data presented in this study demonstrate that *S. pneumoniae* is the most frequent in bacterial meningitis in children and that beta-lactams resistance is frequent in our hospital.