and/or surgical treatment depends on the Stage of the CE-infection, not on the general condition of the patient.

## Background and Aim

Staphylococcus coagulase negative strains are colonized on epiderm and distribute in environment and outer bodies apparatus such as protez and intera-venous catheters. The aim of this study was the frequency of Staphylococcus coagulase negative isolated from venous and catheters children hospitalized in NICU of Hamadan hospitals and determination of antibiotics resistance patterns in Hamadan, the west of Iran.

### Methods

We collected 108 samples randomly from patients who were hospitalized in NICU hospitals of Hamadan and they needed to venous or urinary catheters. One specimen of each patient was taken and inoculated into carrier transported media and transferred to bacteriology laboratory to identification of strains. Antibiogram was performed by Kirby-Bauer method. Data was analyzed using SPSS 15 software.

### Results

Out of 108 tested samples, 32.7% of patients had urinary catheter and 67.3% had venous catheter. 28% of tested samples had positive culture. The positive cases were significantly found in those children who had been used catheter more than 48 hours ($P = 0.00$). From the positive cases, Staphylococcus epidermidis (40.4%), Acinetobacter baumannii (10.6%) and E. coli (8.5%) were the most common isolates. The most rate of resistance of Staphylococcus epidermidis was against to erythromycin and ampicillin. The most rate of sensitivity bacter baumannii (10.6%), Staphylococcus epidemidis (40.4%) and Staphylococcus aureus (27.5%); Occasional seizures: 69 (32.24%); Infections of central nervous system (CNS): 53 (24.7%) (26 méningitidis and 27 méningo-encéphalitis); Febrile seizures: 24 (11%); Indeterminate cause: 09 (04%). It was noted a long delay between the onset of clinical manifestations and world-renowned workplace support. The drugs used are also indicated the high drug resistance in strains isolated from catheters.

## Background and Aims

Status Epilepticus is one of the most frequent neurological emergencies in Pediatrics, that can involve the vital and functional prognosis in the short and long term. The Aim of this study is to determine epidemiological, causative, diagnostic aspects and to evaluate the therapeutic means.

### Methods

In this prospective study we analyse 214 children with status epilepticus between January 2008 and December 2010. Results The mean age was 04 years (min: 28 days - max: 15 years) with a sex ratio equal to 1.3. 60% of cases was febrile. 31% of the seizures are generalized. The different etiologies are: Epilepsy: 59 (27.5%); Occasional seizures: 69 (32.24%); Infections of central nervous system (CNS): 53 (24.7%) (26 méningitidis and 27 méningo-encéphalitis); Febrile seizures: 24 (11%); Indeterminate cause: 09 (04%).

### Conclusion

Our results showed the high contamination in used catheters particularly in those patients who needed to catheter for long time. We also indicated the high drug resistance in strains isolated from catheters.

## Background and Aims

Status Epilepticus is one of the most frequent neurological emergencies in Pediatrics, that can involve the vital and functional prognosis in the short and long term.

### Methods

We reviewed prospectively 183 pediatric patients with symptomatic UTI admitted to emergency department or referred to nephrology clinic from November 2002 through July 2005. All patients underwent renal ultrasonography and voiding-cystouretherography or radionucleic cystography. Diuretic renal scan or intravenous pyelography (IVP) was performed in those with urinary system dilation. Urodynamic studies were done in patients with normal radiologic findings and recurrent infections or urinary-intestinal symptoms.

### Findings

Of 183 patients, 130 cases (71%) were female and 53 patients (29%) male. Most of the patients (61.9%) were between 2–24 months old ($P = 0.001$). Vescicouretal reflux (VUR) was the most common predisposing factor in both genders (46.9% in girls and 49.9% in boys). Voiding dysfunction in girls and urinary obstruction in boys were found with a significant difference ($P = 0.03$ for both). In all age groups, except patients 1 month, the most common predisposing factor was reflux. Reflux, urinary obstruction and nephrolithiasis were found with a significant difference in 2–24 months age group ($P = 0.001$ for all).

### Conclusion

In our study vescicouretal reflux (VUR) was as common in boys as in girls, and suggested urolithiasis as a significant UTI predisposing factor. This study showed that voiding dysfunction in girls and urinary obstruction in boys are as significant predisposing factors. We suggest urodynamic studies in patients with normal radiologic findings and recurrent infections or urinary-intestinal symptoms.

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