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

**Antibiotics Study on Staphylococcus Spp. Strains Isolated from Venous and Urinary Catheters in NICU of Hamadan Hospitals, West Iran**

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**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 106 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 106 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 gentamycin and ampicillin. The most rate of sensitivity (10.6%) were the most common isolates.

**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.

**Etiologies of the Status Epileptics in Children Hospitalised in the PICU of the University Hospital Center of Oran (Algeria)**

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**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 is 04 years (min: 28 days - max: 15 years) with a sex ratio equal to 1.3. 60% of cases was febrile. 81% of the 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). Vesicoureteral 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 vesicoureteral 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 urodynamics studies in patients with normal radiologic findings and recurrent infections or urinary-intestinal symptoms.

**Acute Pyelonephritis and Diagnostic Parameters**

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**Introduction** Diagnosis and the right time management of Pyelonephritis are extremely important especially if we consider the risk of permanent kidney damage.

**Objectives and research** To analyze the clinical and laboratory signs and radiological presentation of the disease in children diagnosed with acute pyelonephritis during year 2010 in Pediatric clinic, Nephrology Unit.

**Methods** Among cases admitted to Nephrology Unit diagnosed as pyelonephritis acuta, during 2010, we analyzed presentation symptoms by age, inflammatory laboratory results, protein degradation products, urine and kidney ultrasound findings.

**Results** Among of 83 cases with urinary tract infections, 32.5% were diagnosed as pyelonephritis acuta. More frequent among male infants and preschool age and on female school age. 29.6% of the cases were male and 70.3% of the cases were female. Inflammatory parameters were high in 88.8% of cases and the value of above SE:100 mm/h was in 20.8% of cases. Dominated presentation...
Abstracts

PEDIATRICIANS RESPONSIBLE FOR EARLY DETECTION AND SURVEILLANCE OF URINARY TRACT INFECTIONS FROM INFANTS TO PRESCHOOL CHILDREN

Introduction Urinary tract infections (UTI) represent substantial pathology of children’s morbidity. The frequency is just behind respiratory tract infections. The symptoms may be very diverse and non-specific. Early diagnosis very important for preventing complications (especially renal scarring).

Objectives Pediatrician is the first one that has contact with child having UTI. According to the age, symptomatology is diverse and detection has to be well-timed in order to assure proper treatment.

Materials and examinations In the study we evaluated 35 children aged 6 months to 6 years (from January 2009 till January 2012). There were 28 female and 7 male children divided in two groups: A) from 6 months till 3 years (20 children) with following symptoms: dysuria, frequency, lumbar/abdominal pain and temperature. Basic laboratory tests and imaging studies were performed: complete blood count, urinalysis, CRP, urine culture, kidney and bladder ultrasound, Tc99mDMSA scan and cystography. According to the results of urinalysis, CRP, urine culture, kidney and bladder ultrasound, tests and imaging studies were performed: complete blood count, erythrocyte sedimentation rate, urinalysis, CRP, urine culture, kidney and bladder ultrasound, Tc99mDMSA scan and cystography. According to the results of examination of urine sediment and an ultrasound examination of abdominal organs, before we plan any other examination.

Conclusions In cases with high temperature should be planned examination of urine sediment and an ultrasound examination of abdominal organs, before we plan any other examination.

BACTERIAL MENINGITIS IN CHILDREN

Background Meningitis is the most dangerous disease in children and remained irreversible mental disorders. H. influenzae is a fastidious bacteria and may be under detected because of inadequate techniques for isolation or overuse of antibiotics before with recovery of causative agents in bacterial meningitis. In present study two methods, culture and molecular diagnosis (PCR) apply for isolating H.1 from CSF.

Methods DNA was extracted from CSF and probed for the presence of Hib DNA with PCR assay with primer derived from the sequences encoding a capsulation-associated protein; a protein most probably involved in the intracellular transportation of the capsular polysaccharide, and would be expected to react only with capsulate H. influenzae strains. Primers sequencing were:

Primer 1: 5’- CGT TTG TAT GAT GTT GAT CCA GAC T
Primer 2: 5’- TGT CCA TGT CTT CAT AAT G

Results Two hundred three cerebrospinal fluid (CSF) samples collected consecutively from children (less than 5 years) suffering from meningitis were investigated by PCR. There were all the cases of clinical meningitis admitted to three children hospitals in 18 months duration period.

Discussion Two hundred CSF samples were investigated by PCR. Seven samples were positive by PCR method (5 samples were culture positive and 2 samples were culture negative for Haemophilus influenza). Haemophilus influenza type b is a agent 17.1% of bacterial meningitis in children surveyed.

EFFECT OF 4% CHLORHEXIDINE CORD CLEANSING ON COLONISATION AND BACTERIAL COUNT IN HOSPITAL BORN NEONATES

Background Infections in new-borns are the single most important cause for neonatal mortality in developing countries. Of topical antiseptics chlorhexidine has shown potential as an effective cord care agent. Results from randomized double-blind trials examining the effect of chlorhexidine in Asia have been encouraging.

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