enrolled patients simultaneously by the use of Reverse Transcription-Multiplex PCR technique (RT-m PCR). Viral pneumonia was detected in one third of enrolled patients (8/24), with predominance of respiratory syncytial virus A (4/8), followed by Influenza A virus (3/8) and Influenza B virus (1/8) while no cases of respiratory syncytial virus B were detected. The same results were identified in both blood and respiratory specimens.

Conclusion Reverse Transcription-Multiplex PCR technique Multiplex has a significant advantage in that it permits simultaneous amplification of several viruses in a single reaction making this well suited for use in epidemiological studies and to improve etiology-directed clinical management of viral pneumonia.

Methods This is a cross-sectional study was done in North-west of Iran. As first step, we obtained the prevalence of acute gastroenteritis in this area for 2009 then all of related prescription that had inclusion criteria were evaluated in 2010. Related prescriptions adjusted by Furazolidone using frequencies.

Results In the primary study we found out that the total usage of drugs in first nine month of 2009 as below: 840425 Cotrimoxasole, 619044 Metronidazol, 174817 Furazolidone. There are total 1231 antibiotic syrup prescribed by physicians and pediatritions that 174 (14.1%) of them include the furazolidone. From this amount, 18.9% prescribed for children less than 1 years old, 25.6% prescribed for children 1–2 years old, 14.2% for 2–3 years old, 25.4% for 3–5 years old and 19.1% prescribed for children 5–7 years old. Conclusion: According to Giradia’ prevalence (3.5%) and Furazolidone prescribing (174) for acute diarrhea, we can conclude that 75% of usage is more than prevalence of it’s indication for acute diarrhea. Further studies and effective training programs are urgently needed to reverse current irrational treatment practices.

Background and Aims In recent years the problem of mycoplasmal pneumonia, especially in early age children attracted the attention of pediatricians around the world. Purpose - to study the peculiarities of clinical course of mycoplasmal pneumonia in early age children.

Methods From 2009 to 2011 among children with pneumonia analyzed for the presence of mycoplasmal pneumonias. The study involved 450 children aged 5 months to 3 years. Antibodies to Mycoplasma pneumoniae were detected by ELISA in 60 children. Raising antibodies indicated more than 4 times. Conducted clinical observations, X-ray methods, the method of ELISA for the detection of IgM antibodies to Mycoplasma pneumoniae, DNA display M. pneumoniae in sputum by PCR.

Results Mycoplasmal pneumonia began sharply at 80% of children with high fever, cough was dry and unproductive. Outpatient treatment starting antibiotics penicillin group did not give the effect. Pyrexia over 38°C was observed in 95% of children.

On radiographic studies, the bilateral homogenous lobular infiltration revealed in the lungs at the majority of children (75%). Segmenatal nature of the infiltrative changes detected in 5% right-sided pneumonic process occurred in 20%, left-side lung in 33% which used treatment in the infectious hospital during 2011 years. All children were conducted to complex anamnestic and clinical paraclinical inspection.

Conclusions For early age children with mycoplasmal pneumonia is characterized by severe intoxication, prolonged dry cough. On the radiograph indicated bilateral focal mainly infiltration. In the hemogram - a moderate leukocytosis, lymphocytosis, ESR acceleration.

Furazolidone is an anti-parasitic and anti-bacterial drug that used specifically for Giardia as a second-line choice. Some complications was reported that in 10% of children complication occur with diarrhea-vomiting, in children with lack of G6PD, and in children less than 1 years old this drug is not prescribed and is forbidden. This study was conducted to compare of the prescriptions of Furazolidone for treatment of diarrhea in children with the prevalence of Giardiasis.

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