SOCIAL AND MEDICAL RISK INDICATORS IN ADHERENCE OF HIV/AIDS INFECTED CHILDREN BY VERTICAL TRANSMISSION

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50 children were assisted at Hospital Muniz from 8/1/2010 to 2/28/2011: 11 boys (2/12), 11 girls (5/12), 28 teenagers: 9 males (12/17), 19 females (12/18). A social and medical score to value the adherence vulnerability was applied with these categories: annual internments, increase of viral load, decrease of CD4, clinical pathologies, relation between severity of pathology and internment length, lack of taking and/or delivering a medication, poor care support, lack of assistance to Short-Scheduled Hospitalization Program (SSHP). The results are: Low Score (<5): 24 patients. Slight Score (5 to <6): 7 patients. Moderate Score (6 to <12): 8 patients. High Score (>12 to <24): 11 patients. Nobody with low score presents social risks. Social risks were presented in: 5 slight score patients. 6 moderate score patients. 11 patients with high score. Suffered poor care support: 16 patients: 6 under 12 (27.3%) and 10 adolescents, 7 women (36.8%) and 3 males (33.4%). Lack of taking and/or delivering a medication: 20 patients, 4 children under 12 years (18.2%), 16 adolescents, 8 women (42.1%) and 4 men (44.4%) and lack of control to the SSHP, 15 patients: 4 children under 12 (18.2%) and 15 adolescents, 8 women (42.1%) and 3 males (33.3%). Social and Medical risk in adherence indicators (shown at 2010 IAS Congress) adding the data provided by other disciplines managed to predict clinical evolution, to modify guidelines approach, to generate therapeutic strategies for monitoring at different ages, to follow ARV therapies in vertical transmission HIV/AIDS affected children.

SPREADING AND TREATMENT OF ACUTE MIDDLE OTITIS IN CHILDREN

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Goal Development of optimal schemes against acute middle otitis in children through application of the mucoregulatory preparations in the complex antibiotic and basic therapy. Materials and Methods Development of clinical course of acute middle otitis assessment criteria in children; Development of the optimal scheme against acute middle otitis according to disease severity in children; Treatment effectiveness evaluation for complicated acute middle otitis with mucoregulatory preparations in children; Evaluation of complex treatment effectiveness for complicated acute middle otitis in children. 936 patients from 3 months to 14 years were studied: 426 girls, 510 boys. For statistical processing SPSSv12 software was applied. Obtained results Two groups of patients were studied: I: patients with complicated acute middle otitis (53–58.9%); II: patients with acute middle otitis without complications (40.1%); subjective criteria for eligibility: 1. disturbance, behavior changes (younger group), pain - 76%, hearing discomfort 8%; nasal signs 47%; fever - 28.2%. Otoscopic criteria: infiltration and hyperemia of tympanum 46.1%; concaved or arched tympanum 29.3%; changes of light reflex 24.6% (p<0.001). Before treatment average values of mentioned symptoms were equal in both groups (p=0.98) in case of acute middle ear inflammation without complications mucoregulatory preparations (sinuforte) and sinuprep were effective mono-therapeutic remedies. In case of complications mucoregulatory preparations are quite effective. Conclusion Thus, effectiveness of monotherapy with the mucoregulatory preparations in case of acute middle otitis is similar to standard treatment and could be regarded as alternative remedy p = 0.01. As for treatment of complicated disease combined treatment significantly reduces treatment duration p<0.001.

MANAGEMENT OF PERI-ORBITAL/ORBITAL CELLULITIS IN CHILDREN ACROSS TWO DISTRICT GENERAL HOSPITALS

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Aim

1. To find out if there was uniformity in choice of antibiotics.
2. Are blood cultures, swabs and other blood tests helpful in management.
3. Look at involvement of other specialties in terms of follow-up and management.

Methodology Retrospective analysis of case notes with a diagnosis of preseptal/orbital cellulitis across 2 DGH. 15 such cases were recruited.

Results There was no uniformity in the antibiotics used. (Different combinations were used).

Blood cultures were negative in 13 cases.
6 out of 15 had CRP<15.
Eye swab was positive in 3 cases.
Allied specialties were involved in 9 cases.
Only 1 out of the total 15 cases developed an abscess and incidentally did not have anti-staphylococcal cover.