Conclusion Early surgical intervention (≤5 days) was associated with a shorter duration of hospital stay and antibiotic therapy as well as a lower complication rate. We recommend that corrective surgery be undertaken as soon as reasonably possible.

**1498 OCCIPITAL LOBE EPILEPSY IN KUWAITI CHILDREN: A STUDY OVER 2 YEARS**

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**Objective** To study the clinical profile and therapeutic outcome of occipital lobe epilepsy in Kuwaiti children attending epilepsy clinic in a regional hospital.

**Design** A retrospective case series study over two years.

**Setting** Analysis of case files from the epilepsy clinic of a regional hospital who were diagnosed with occipital epilepsy between Aug 2009 to Aug 2011.

**Subjects** Eleven cases were retrieved for study.

**Results** Ten children had the late childhood form of Gastaut (age 6–12 years) and one had the early childhood form of Panayiotopoulos (age 3 years). Ten children had visual symptoms all of whom presented with sudden onset and cessation of blindness lasting for seconds to few minutes and 5 had visual hallucinations. Half of them had headache. Ten were idiopathic and one of them had focal occipital encephalomalacia. The EEG showed occipital spikes in 8 cases, extracapital spikes in 2 cases and generalized discharges in 1 case. All the patients responded well to antiepileptic drugs (carbamazepine, oxcarbazepine, sodium valproate, levetiracetam).

**Conclusion** Occipital epilepsy, though rare must be considered in children with paroxysms of transient visual symptoms with or without head ache and must be distinguished from migraine.

**1499 STUDY OF THE PATTERN OF CEREBRAL PALSY AMONG CHILDREN IN ALEXANDRIA, EGYPT**

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Cerebral Palsy (CP) is the commonest neuromotor impairment in childhood. In recent years, there has been mounting changes in CP pattern. Advances in perinatal and newborn cares have been responsible for these changes. Advances in medical techniques have been also responsible for the extension of the life of CP children to an age of diagnosis and classification. Over the last several years, our knowledge about CP has been substantially improved, but much work still remains. Despite of its importance, the problem is largely ignored in developing countries including Egypt. The aim of our study was arranged for:

1. Giving a recent comprehensive study about CP patterns among CP infants and children attending Alexandria University Children’s Hospital over a period of one year (2010–2011) including: clinical types, topographic types, etiology, and severity.
2. Identifying common associated impairments of CP cases.
3. Comparing our results with other similar studies in Egypt and other developing and developed countries.

**1500 OXIDATIVE STRESS IN IRANIAN EPILEPTIC CHILDREN**

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**Background** Lipid peroxidation is an indicator of free radical metabolism and oxidative stress in human beings and other organisms. Malondialdehyde (MDA), an end product of lipid peroxidation, is a metabolite that can be readily estimated in serum samples. Our objective in this study was to ascertain the variations in malondialdehyde (MDA) in children with epilepsy.

**Material and Methods** This study was carried out in Ardabil and Alborz provinces of Iran after obtaining clearance from the Institutional Ethics Committee. Informed consent was obtained from all the subjects. The quantitative examination of MDA was performed according to standard procedures. The ideal serum level of MDA is below 2.5 nmol/ml.

**Results** 90 children with confirmed epilepsy (mean age 9.3±1.5) were included in the study. MDA levels ranged from 1.5 to 3.6 nmol/ml (mean level = 2.03±0.37 nmol/ml). Eighty children (90%) had MDA levels above the upper limit of normal. Ten patients had levels above 2.85 nmol/ml.

**Conclusions** This study had shown that the estimation of MDA levels in serum is a convenient method to study lipid peroxidation and thereby oxidative stress in children with epilepsy. Over half of children with epilepsy have excess oxidative stress as indicated by high levels of MDA in the serum. Correlations between MDA level and characteristics of epilepsy, AED therapy, nutritional status and other medical conditions need to be observed in a larger cohort.

**1501 QUALITATIVE STUDY OF PSYCHOSOCIAL PROBLEMS AMONG MOTHERS OF CHILDREN WITH CEREBRAL PALSY ATTENDING TERTIARY CARE HOSPITALS IN WESTERN INDIA**

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**Background and Aims** The parents of children with cerebral palsy face several problems in meeting physical, psychological and social requirements of their children. We explored the psychosocial problems faced by the mothers of children with cerebral palsy in rural and urban settings and compared the same.

**Methods** Qualitative research design through Focus Group Discussions (FGDs) was utilized. Two FGDs were conducted - one each at rural and urban tertiary level care hospital involving eight and six mothers respectively. Ethical clearance was obtained from Institutional Ethics Committee. The FGDs were conducted by a moderator using an FGD guide and were video recorded. Transcripts were prepared from the video recordings and were analyzed qualitatively.

**Results** The problems experienced by the mothers were associated with common themes such as - Disturbed social relationships, Physical problems, Moments of Happiness, Worries about future, Need for a special school, Requirement of a support group, Lack of adequate number of trained physiotherapists and Lack of government support. All the parents had children with problems since birth and most had gone to various health care providers for a cure for their child. The participants in the FGD undertaken at the urban based hospital appeared to be poorly adjusted to the problem of the child as compared to the participants in the rural based hospital.

**Conclusions** Current psycho-social status of the parents should always be considered. Program planners, Hospital administrators and health care providers need to be sensitized about the perceived need of this vulnerable population.