Conclusion In the group of massaged infant seems to obtain better results in motor milestones and in cognitive development, faster maturation of stereopsis, a increase of visual acuity have been also reached.

**Methods** Participants included 29 children who received either placebo (n=15) or FKGM (n=14) at the onset of URIs symptoms. The therapeutic effects assessed URI symptoms scoring system given by the James A Taylor for clinical studies to identify children with a documented viral URIs. Results were evaluated using student’s t-test; the Kaplan-Meier method was used to analyse data regarding symptom duration.

**Results**

**Abstract 1738 Table 1 URI symptom score**

<table>
<thead>
<tr>
<th>Symptom</th>
<th>Placebo (n=15)</th>
<th>FKGM (n=14)</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>throat pain</td>
<td>3.27±4.17</td>
<td>2.12±6.42</td>
<td>0.120</td>
</tr>
<tr>
<td>expectoration of sputum</td>
<td>4.93±4.04</td>
<td>3.00±2.75</td>
<td>0.148</td>
</tr>
<tr>
<td>sneezing</td>
<td>4.13±4.21</td>
<td>2.21±5.22</td>
<td>0.147</td>
</tr>
<tr>
<td>runny nose</td>
<td>9.60±6.67</td>
<td>6.36±4.53</td>
<td>0.140</td>
</tr>
<tr>
<td>nasal congestion</td>
<td>8.40±4.10</td>
<td>3.79±2.72</td>
<td>0.006*</td>
</tr>
</tbody>
</table>

**Abstract 1737 EPIDEMIOLOGICAL ASPECTS OF STREPTOCOCCAL PHARYNGEAL INFECTIONS IN PEDIATRIC POPULATION**

doi:10.1136/archdischild-2012-302724.1737

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**Background and Aims**

During last 5 years, we noticed an increasing incidence of scarlet fever and streptococcal pharyngitis in our county.

**Aims**

1. To appreciate the positive results rate for beta-hemolytic pyogenic streptococci in throat specimens (group A streptococci - gAs, group C- gCs, group G- gGs);
2. To evaluate ratio of each streptococcal group pharyngeal infection;
3. To establish correlation between streptococcal infections and diseases that justified throat cultures.

**Methods**

Authors designed a retrospective epidemiological study, analyzing microbiology department data during 14 months period. Inclusion criteria: hospitalized and ambulatory care children aged between 2–18 years (scarlet fever diagnosis, pharyngitis diagnosis, healthy children requesting throat exam). Exclusion criteria: children up to 2 years of age. In order to identify streptococci, authors used Columbia agar with 5% sheep blood, Bacitracin inhibition tests, latex agglutination. Data was statistically analyzed using likelihood ratio.

**Results**

Among 6653 throat cultures, 497 isolates (7.47%) were positive. Ratio for each streptococci group was: group A –88.0%, group C–6.2%, group G–5.8%. Seasonal incidence: higher incidence was reported in February and lower incidence in August. Regarding correlation between patient diagnosis and identified streptococci group in throat specimens (p value =0.000): 112 scarlet fever patients (111 gAs, 1 gGs), 264 pharyngitis patients (234 gAs, 18 gCs, 17 gGs), 121 healthy children (93 gAs, 18 gCs, 10 gGs). Last mentioned patients mean pyogenic streptococci carriers (24.5%).

**Conclusions**

Carriers represents the “infection pool” for community children, maintaining persistence of source infection and explaining diminished efficacy of epidemiological measures and infection outbreaks in pediatric population.

**Abstract 1738 EFFECTS OF FORSYTHIA KOREANA-INCLUDED HERBAL MEDICINE TREATMENT ON UPPER RESPIRATORY TRACT INFECTION IN KOREAN CHILDREN**

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**Background and Aims**

Korea has known high antibiotics prescription in children upper respiratory tract infections (URIs). Recently, herbal therapy is be magnified instead of unnecessary antibiotics prescription. Forsythia Koreana has been extensively used for the treatment of viral and bacterial respiratory tract infections. However, it remains unclear whether the herbal medicine has beneficial effects through clinical control study in URIs. Therefore, to investigate the anti-viral effects of Forsythia Koreana included herbal medicine (FKGM) on URIs in children, we conducted a randomized, double-blind, placebo-controlled study.

**Conclusions**

FKGM was more effective than the placebo in terms of reducing the duration of URI symptoms and reducing nasal discharge. These findings suggest that FKGM can be used for the replacement of antibiotics.

**Abstract 1739 SOCIOECONOMIC CHARACTERISTICS OF THE CHILDREN WHO NEEDED HOSPITALIZATION IN A PEDIATRIC INTENSIVE CARE UNIT (PICU)-RETROSPECTIVE ANALYSIS**

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