Abstracts

1Ozdemir, FE Canpolat, S Yurtutan, MY Oncel, O Erdeve, U Dilmen. Zekai Tahir Burak Maternity Teaching Hospital; 2Pediatrics, Yildirim Beyazit University, Faculty of Medicine, Ankara, Turkey

Background and Aims The objective of this study was to determine whether use of a longer (1 in.) rather than a standard (5/8 in.) needle used for macromoronic neonates (birthweight over 4000 g) may affect antibodytters after immunization against hepatitis B virus (HBV).

Methods Fifty nine healthy infants were vaccinated at birth, 1, and 6 months of age with hepatitis B vaccine, with follow up to 7 months of age. Infants were randomized into two groups according to needlelength of first vaccine at birth. First group vaccinated with standard needle length and other group received vaccine by longer needle length.

Results Macrosomic infants who were immunized with a longer needle achieved significantly higher antibodytiters to hepatitis B surface antigen than standard needle length (median, 3890.2 vs 1311.7 mIU/mL, respectively; p=0.001).

Conclusions Macrosomic neonates benefit from longer needle length with higher levels of antibody titers after HBV vaccination.

1823 THE EVALUATION OF ANTIBODY RESPONSES IN STEROID SENSITIVE CHILDREN WITH NEPHROTIC SYNDROME

doi:10.1136/archdischild-2012-302724.1823

1O Can, F Ankan, MA Taşar, B Çelikce Acar, E Can, Y Dallar Bilge. Pediatrics; 2Pediatric Nephrology, Ministry of Health, Ankara Training and Education Hospital; 3Biochemistry, Ministry of Health, Etilk Obstetrics-Gynecology Training and Education Hospital, Ankara, Turkey

Nephrotic syndrome is characterized by massive proteinuria, hypalbuminemia, and edema. Immunoglobulin changes, T lymphocyte function disorders, and the reduction in complement levels in the nephrotic syndrome cause an increase in the risk of viral and bacterial infections.

For this purpose, children with nephrotic syndrome followed in the Pediatric Nephrology Department were screened for antibody levels and seroconversion of hepatitis A, hepatitis B, chicken pox, mumps, measles, rubella, and pneumococcus vaccines.

An evaluation of the seroconversion status of study and control groups revealed that all the children had negative anti CMV IgM, anti HCV, anti HIV, anti HAV IgM, HBsAg, anti mumps IgM, anti measles IgM and antirubella IgM. Only two children in the study group had anti-VZV IgM positive.

When the study and control groups were evaluated within the groups separately, a statistically significant difference was observed in the positivity of anti HAV IgG, anti HBs, anti pneumococ IgG, anti VZV IgG, anti mumps IgM, anti measles IgG and antirubella IgG before and after vaccination.

When the study and control groups were compared to each other in respect to antibody titers before and after vaccination, there was no significant difference in anti HAV IgG, anti HBs, antipneumococcus IgG, anti mumps IgM, anti measles IgG and antirubella IgG. But the study groups were statically different in respect to anti VZV IgG.

The evaluation of children with nephrotic syndrome for the seroconversion status and their vaccination against the necessary microorganisms would be a cost effective approach reducing the frequency of relapses and infection related morbidity and mortality.

1826 SURVIVAL RATE OF DISSEMINATED BCGITIS IN CHILDREN WITH PRIMARY IMMUNODEFICIENCY - SINGLE CENTER EXPERIENCE

doi:10.1136/archdischild-2012-302724.1826

1O Al-Zahrani, A Shehzad, S Al Tubaiti, M Al Bakhash, M Azzam, A Abu Taleb, S Bin Yheeb, A Abdulwahab, J Youssif, S Abdulmalik, N Hussein, A Momen Ahiq, A Raddadi, M Satti, H Kamal, A M Alwaleed. Immunology and Allergy, Pediatrics; 2Pediatrics, ICU; 3Pediatric Surgery; 4Dermatology Department; 5Pathology Department; 6Pediatric Infectious Disease; 7Microbiology/Immunology-Laboratory Medicine, King Abdulaziz Medical City-WR, Jeddah, Saudi Arabia

Background and Aims Overall prevalence of primary immunodeficiency (PID) is 1:2,000 live births. PID characterized by increased

1824 THE EVALUATION OF THE VACCINATION RATE AND THE PARENTS KNOWLEDGE ABOUT VACCINATION

doi:10.1136/archdischild-2012-302724.1824

M Inalhan, A Ozlem, T Ozlem, F Feyza, C Mehmet, P Eza. Zeynep Kamil Maternity and Children’s Disease Training and Research State Hospital, Istanbul, Turkey

Objective Immunisation is one of the most important weapons for protecting individuals and the community from serious diseases.

Method The survey method is applied to the mothers of children 12 months and over who hospitalized in our clinic between February and May 2010. Mothers of children who agreed to participate in the study and whose vaccine records can be reached are included in the study.

Findings The average age of the children was 4.56±2.5 years, of the mothers was 29.23±4.74 and of the fathers was 32.95±5.47. The most common answer given to the question “Why vaccinate?” was “for being healthy” (n=35). The most memorable vaccine was tuberculosis vaccine (n=35). In our study, we didn’t find any statistically significant difference between the immunization status of children and the mother’s education, mother’s profession, father’s profession, occupational distribution.

There wasn’t any difference between the vaccination status of children and the age average of mothers: (z=−0.430; p=0.668) the age average of fathers (z=0.756; p=0.450).

Results Despite all studies and campaigns, the rate of being full vaccinated is beneath the levels of 90–95%. We need more campaigns to increase the vaccination rate of the society.