

Results Short stature was identified in 54% of patients, while malnutrition was identified in 70% of patients. Anthropometric evaluation of the upper arm, skin fold thickness and weight for height are useful parameters to evaluate nutritional status in children with CLD.

Conclusions Growth retardation and malnutrition are common complications in children with CLD, particularly with progression of liver disease severity. Therefore, nutritional support is an important aspect of therapy.

Gastroenterology and Hepatology/Nutrition

PO-0147a EFFICIENCY OF THE COMBINED ANTIVIRAL THERAPY OF CHRONIC HEPATITIS C IN CHILDREN

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Aim The purpose of this work was to study efficiency of the combined antiviral therapy in children with chronic hepatitis C in Republic of Moldova.

Methods In compliance with the National Program (2007–2016) in paediatric hepatology department 35 children, aged 4–17 years, were treated with pegylated interferon alpha 2b (60 mcg/m²/week) plus ribavirin in a dose of 15 mg/kg/day; therapy length of 24 weeks for genotype 2 and 3 or 48 weeks for genotype 1b. The diagnosis was confirmed by clinical, biochemical, immunological modification, including degree of viremia (ARN VHC PCR Real Time ROTOR Gene6000 CORBETT RESEARCH) and transient elastometry (Fibroscan) for detecting liver fibrosis.

Results Chronic hepatitis C (genotype 1b – 31, genotype 2–1, genotype 3a in 3 children) was characterised by the minimal clinical signs, low biochemical activity in 60% of cases. Low virus loading (<600000 ui/ml) and a minimum degree of fibrosis of F0-F2 was identified in 29 of 35 children. 33 patients finished treatment. 2 children discontinued treatment because of the expressed headaches and in connexion with immigration. In the course of treatment by pegylated interferon and ribavirin most common of the side effects were pyrexia, headache, neutropenia, fatigue, anorexia, injection site erythema and vomiting. **Conclusions** Combined antiviral therapy of chronic hepatitis C in children was safe. This treatment program needs an individual approach and it was effective SRV in 73% cases, inclusive in genotype 1b – 69%, in genotypes 2 and 3a – in 100%.

PO-0147b EFFECT OF CONTROLLED CONSUMPTION OF AMARANTH FLOUR ON THE NUTRITIONAL RECOVERY IN MALNOURISHED CHILDREN WITH GRADE I

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Objective Analyse the effect of amaranth flour on the nutritional recovery in two groups of children from 2 to 4 years with malnutrition grade I, one with control over their consumption and the other with a regular consumption over a period of three months.

Material and methods Quantitative, quasi-experimental longitudinal prospective study. We followed up to 83 children aged

between two and four years of age with malnutrition grade I, three health centres in the Health District I San Luis Potosí.

Results 46 children joined the experimental group and 37 in the control group in the first 27 female and 19 male, average age of this group was 3 years and 4 months old. The control group was composed of 21 females and 14 males with a mean age was 3 years 1 month old. We followed up the groups over three months. The final comparison (sixth evaluation) by paired analysis between groups was observed in the experimental suffered significant increases compared to control variables such as weight, subscapular skinfold and Centripetal index.

In this study was demonstrated that parameters such as PT, PSE, PB, AM and AG can be used as evaluation measures sensitive to nutritional changes in short time.

PO-0148 WITHDRAWN

Hematology and Oncology

PO-0149 RED CELL TRANSFUSION VOLUME IN NEONATES

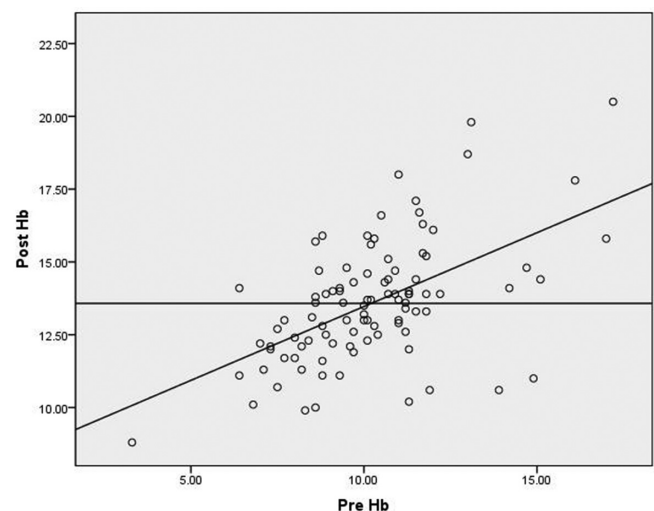
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Background Neonatal Red cell transfusion volume is traditionally calculated based on weight 10–20 ml/kg. The main objective was to explore whether desired Hb level was achieved post transfusion and if other variables such as weight, pre-transfusion Hb value, and RCC volume affect transfusion outcome.

Methods This retrospective quantitative descriptive study included all neonates admitted to NICU requiring their first blood transfusion in a single tertiary referral centre. Hb levels pre and post transfusion as well as volume transfused were evaluated.

Results Over one year, 108 neonates received a blood transfusion. Complete data set in terms of pre and post transfusion Hb values, weight, and volume transfused was only available for 78 neonate. The mean Hb pre-transfusion was 10.3 ± 2.5 g/dl with



Abstract PO-0149 Figure 1 Correlation between pre and post transfusion Hb

29.6 ± 19.1 ml transfused volume and the mean Hb post-transfusion of 13.6 ± 2.1 g/dl. Only 5 (6%) of infants did not reach the desired Hb level post-transfusion and 4 of these infants were mechanically ventilated. There was a poor correlation between infant weight and post transfusion Hb (R = 0.028, p = 0.81). However, pre-transfusion Hb positively correlated with post-transfusion Hb (R = 0.509; p < 0.001) (Figure 1).

Conclusion Incorporation of the pre-transfusion Hb value in the calculation of RBC transfusion volume may achieve the desired Hb threshold and hence reduce the need for further transfusion.

PO-0150 WITHDRAWN

PO-0151 EPIDEMIOLOGICAL CONSIDERATIONS ABOUT PAEDIATRIC SARCOMAS IN ALBANIA

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Dates Sarcomas are frequent in the paediatric age occupying the fourth place (by about 10%).

Objectives Presentation of some epidemiological data of paediatric sarcoma in our country for 14-year period from 1997 to 2010.

Method 116 children 0 to 14 years with PS were followed in our service, in Adults Oncology service and surgery service. We studied the specific weight of the PS in the general paediatric morbidity vs. paediatric cancers; annual incidence in the paediatric population, the incidence during the performance period under study (1997–2010); geographical distribution according to three areas of Albania, 12 regions and 36 districts, urban and rural areas, according to different age groups and by gender.

Results Sarcomas in our country constitute 8.3% of all paediatric cancers (CI from 1.5% to 15.1%). The annual incidence in the general population is 0.19, the cumulative incidence for the period 14 years in the paediatric population is 9.1/10⁵ children born alive, with an average annual incidence of 0.65/10⁵ children born alive. However, within the period of study '04-'10 incidence has increased almost by 50% compared with the first 7-year (0.96 vs. 0.43). High incidence was found in Northern Albania, in the areas of Dibra, Kukes, and Durres etc. By age group, annual incidence increased in proportion with the increase of age (0.86/10⁵ paediatric population at age 10–14 years vs. 0.38/10⁵ in the age group 0–12 months) is higher in urban areas and in males, but without significance.

Conclusions High numbers of PS in Albania, high mortality, is forcing attention from health institutions.

Dynamics study of incidence for the whole period draws attention to a growing incidence of lightly progressive; a higher incidence for years 04–10, there may be incentives in search of various factors favourable or explosive, environmental or other that may have influence on this phenomenon.

PO-0152 WITHDRAWN

PO-0153 A REVIEW OF PRACTICE FOR PRESCRIBING ANTIEMETICS IN PAEDIATRIC HAEMATOLOGY AND ONCOLOGY

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Background and aims In July 2013 the European Medicines Agency reviewed risk-benefit ratios for Metoclopramide following concerns about neurological side-effects including short-term extrapyramidal disorders.

Our practice review assesses safety and efficacy of current antiemetic agents in controlling CINV (Chemotherapy induced nausea and vomiting) in a tertiary centre of UK.

Methods A randomised review of inpatient chemotherapy prescriptions done from paediatric Haemato-Oncology in first 7 days of initiating treatment in Excel format. It included choice of anti-emetics with regards to chemoregimen, compatibility of agents used together, dose, frequency and adverse reactions that might be related to antiemetics.

Results Number of children assessed in study were 26. A total of 23 prescriptions with Ondansetron, Metoclopramide, Dexamethasone, Hyoscine, Domperidone, Levomepromazine and Aprepitant were assessed. Ondansetron was prescribed in 23 and Metoclopramide in 19 prescriptions.

Degree of antiemetic control surrogately assessed by use of PRN antiemetics where Metoclopramide and Levomepromazine most commonly used PRN drugs.

There were 8 occasions (34%) of multiple dopaminergic antiemetic prescribing.

1 acute dystonic reaction observed in a 9 year old male child on Day 4 during methotrexate clearance. Metoclopramide and Levomepromazine were both administered.

Conclusions Raising awareness about antiemetic compatibility in prescribing multiple dopaminergic antiemetics. A considerable degree of Metoclopramide use noted for controlling CINV in both regular and PRN use. Developing validated tools to improve antiemetic prescribing efficacy with specialist pharmacology input.

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PO-0154 SYMPTOMATIC OSTEONECROSIS OCCURRING IN PORTUGUESE CHILDREN AND ADOLESCENTS TREATED FOR HEMATO-ONCOLOGIC DISEASES – A 15-YEAR LONGITUDINAL OBSERVATIONAL STUDY

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Background and aims Along with the improved cure rate in paediatric cancer, awareness of treatment related late effects has become increasingly important. Osteonecrosis is an emerging complication of intensive chemotherapy including high doses of steroids. We aimed to describe clinical and imagiologic characteristics of survivors of paediatric hematologic malignancies who developed osteonecrosis.