ACUTE BRUCELLOSIS: CLINICAL PRESENTATIONS AND COMPLICATIONS IN CHILDREN

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Brucellosis is a systemic infectious zoonotic disease and is still an important public health problem in Arabian Peninsula. The clinical presentation of brucellosis is non-specific, and the infection varies in its course and severity.

Objective To evaluate common presentations and complications of involvement of acute Brucella infection in children presented to the paediatric emergency unit of Aladanhospital.

Methods Design: Retrospective study
Setting: Paediatric emergency unit and paediatric department of Aladdin hospital, Kuwait between April 2008 and April 2013.
Subjects: Sixty two children with acute brucellosis

Results Out of 62 patients, 36(58.1%) were male and 26 (41.9%) were female. The mean age was 9.5 ± 3.2 years. Arthritis (47% vs 51%), respiratory rate (p = 0.584) or oxygen saturation on admission (p = 0.000) was obtained. Males (47% vs 51%), exclusively breastfeeding (51% vs 56%), or RSV infection (47% vs 51%), positively correlated with the variable of respiratory rate. There were no significant differences in mean age (3.5 vs 1.7 months, p = 0.000), severity clinical scale (5.37 vs 4.93 points, p = 0.021) and in receiving salbutamol (85.7% vs 19.1%, p = 0.000). There was no different in respiratory rate (p = 0.584) or oxygen saturation on admission (p = 0.07). The LOS was 2.43 days ± 3.22 days.

Conclusions In our series, CO administration before admission to BA decreases LOS significantly. The CO group was older but not statistically significant (p = 0.07). The LOS was 2.43 vs 3.22 days, p = 0.004.

Early estimation of serum hs-CRP and IL-6 levels could provide an early prediction for positive BC so allowing early initiation of therapy.

PO-0182 DIAGNOSTIC IMPORTANCE OF SERUM CRP AND IL-6 FOR EARLY INFANTILE SEPSIS

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Objective To assess the efficacy of early estimation of serum high-sensitivity C-reactive protein (hs-CRP) and interleukin (IL-6) to differentiation between infants less than 3 months of age had sepsis and those free of infection and to assess their use as early predictor for result of blood culture (BC).

Patients and methods The study included 90 infants less than 3 months old, admitted to paediatric department of Benha university hospital, all of them showed clinically features of sepsis. Our patients were subdivided into; clinically septic infants with positive BC, clinically septic infants with negative BC and suspected septic infants with negative BC. Two venous blood samples were obtained: The first at time of hospital admission for ELISA estimation of hs-CRP and IL-6 serum levels and the second sample was obtained either at time of development of clinical signs of sepsis or at 72 h in non-infected groups.

Results Blood culture was positive in 42 infants, 21 infants were clinically infected but with negative BC and 27 infants were suspected to have sepsis and BC were negative. Serum hs-CRP and IL-6 levels were significantly higher in infants with positive BC compared with those with negative BC. Assessing the predictive factors for infantile sepsis with positive BC by regression analysis showed that high total WBC count, high hs-CRP, and serum IL-6 were the most significant predictors.

Conclusion Early estimation of serum hs-CRP and IL-6 levels could provide an early prediction for positive BC so allowing early initiation of therapy.

Poster abstracts