micrognathia, broad occiput, low set ears, single palmar crease, and large cleft palate. Subsequent genetic tests confirmed unbalanced translocation of chromosome 3 and 7. She was gradually weaned off ventilator support at 2 weeks and was discharged from NICU. A week following discharge she presented with bronchiolitis and has continued need for High flow (Vapotherm) support. She feeds on high energy formula via a nasogastric tube due to poor weight gain and remains on treatment for moderate to severe reflux. She islikely to need gastrostomy and cleft surgery.

**Conclusion** Dysmorphic features as reported in this case report should raise suspicion of a chromosomal defect, which needs early genetic referral and microarray. Balanced translocations are common and usually do not have specific clinical features. However unbalanced translocations are uncommon but they may have significant clinical expressions.

## PO-0377 WITHDRAWN

## PO-0378 SAFETY OF BIFIDOBACTERIUM ANIMALIS SUBSP. LACTIS (B. LACTIS) STRAIN BB-12-SUPPLEMENTED YOGHOURT IN HEALTHY CHILDREN: A PHASE I SAFETY STUDY

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Probiotics are live microorganisms that, when administered in sufficient doses, provide health benefits on the host. The purpose of the study is to determine the safety of *Bifidobacterium animalis* subsp. *lactis* (*B. lactis*) strain BB-12 (BB-12)-supplemented yoghourt when consumed by generally healthy children. Secondary aims are to evaluate the influence of BB-12 on the faecal microbiome and changes in the microbial community. A phase I, double-blinded, randomised, placebo-controlled study was conducted in compliance with United States Food and Drug Administration guidelines for an Investigational New Drug (IND). Sixty participants were randomly assigned to consume four-ounces of the active yoghourt supplemented with BB-12 or placebo yoghourt daily for 10 days. The primary outcome was to assess safety and tolerability, assessed by the number of reported adverse events. Preliminary results show 181 non-serious adverse events were reported, with no differences between the groups. Three serious adverse events unrelated to the yoghourt interventions were reported. BB-12 supplemented yoghourt is safe and well-tolerated when consumed by healthy children. Faecal samples collected before, during and after the intervention period will be analysed using state-of-the-art DNA sequencing and analysis tools to assess the relationship between the microbiome and probiotics, and to provide novel information on the dynamics of the complex ecosystem in the human gut. This study will form the basis for future clinical trials investigating the potential effects of BB-12 supplemented yoghourt in a variety of disease states.

## PO-0379 DIFFERENT ASPECT OF CHILDHOOD LANGHERHANS CELL HISTIOCYTOSIS : EXPERIENCE FROM A SINGLE CENTRE

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**Introduction** Langerhans cell histiocytosis (LCH) is characterised by a reactive clonal proliferation and accumulation of dendritic cells with a wide range of clinical presentations.

Survival rate depend on single or multisystem disease.

**Objectives** The aim of the study was to analyse the clinical, radiologic features and responses to treatment.

**Materials and methods** We retrospectively reviewed the clinical data, histopathological, radiologic features, treatment modalities, and outcome of patients presenting with LCH.

**Results** 9 patients were included with two brothers. There were 5 girls and 5 boys. Mean Age at diagnosis was 39 months. The main clinical feature was prolonged ferver (5 cases), and impaired general condition (3 cases).

Skin involvement was present in 5 patients, otitis in 3 patients and 3 cases of lung injury with Spontaneous pneumothorax in one case. 3 different Tumour syndromes were observed at diagnosis. The most of patients present a multi-system disease.

Radiologic finding showed 2 cases of bone involvement. The bone marrow involvement was present in 2 patients. Six patients received corticosteroid and vinblastine combination with the use of cyclosporine in 3 cases. One patient developed insipidus diabetes. Two patients dead.

**Conclusion** Childhood Langherhans cell histiocytosis is a rare and poorly understood multi-system disease. Treatment decisions are difficult given the unpredictable course of the disease sometimes spontaneous, mainly for unifocal forms remissions.

Patients with localised disease generally have a good prognosis and require minimal treatment. However, patients with lesions in 'risk' organs (liver, spleen, lung, bone marrow) have a worse overall prognosis regarding mortality and morbidity.

## PO-0380 PARENTAL EMOTIONAL REACTIONS TO PAEDIATRIC HOSPITALISATION

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**Background and aims** When the child is admitted to hospital, parents are faced with a crisis generated by the traumatic events of disease and hospitalisation. This questionnaire-based survey aims to explore the emotional responses of parents to their children's hospitalisation and associate them to health-care professionals' behaviour.

**Methods** Parents (80 mothers, 75 fathers) of 155 children aged 2–12 years, hospitalised at least 4 days, completed the questionnaire and engaged in private structured interviews. The questionnaire contained demographic data (age, sex, and educational background), questions about parent's psychological characteristics in general and their specific emotions during the pre-admission and in-hospital phase.